

Flood Insurance 101



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is on your side

Alex

Bonnie

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Fiona

Gaston

Hermine

Igor

Julia

Karl

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Matthew

Nicole

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Paula

Richard

Shary

Tomas

Walter

Virginie

Flood Definition

- Two or more acres, normally dry land areas;
two or more properties
- Overflow of inland or tidal waters
- Accumulation / run off of surface waters
- - **ANY** SOURCE
- Mudflow



Important Facts About Flooding and Flood Insurance...

- ❑ Every building is in a flood zone.
- ❑ Flood is the most common natural disaster.
- ❑ Flood damage is more likely than fire damage.
- ❑ Date of construction matters.
- ❑ Just because your flood zone changes doesn't mean that the risk has changed.
- ❑ Flood insurance purchase is lender driven.
- ❑ Flood insurance is a single peril policy.

Federal Disaster Assistance



GRANTS VS. SBA LOANS

What Do FEMA Flood Zones Mean?

- ▣ Special Flood Hazard Area (SFHA): All A and V lettered zones.
- ▣ SFHA: An area having special flood, mudflow or flood-related erosion hazard and as shown on Flood Insurance Rate Map (FIRM)
- ▣ A= Accumulation V=Velocity
- ▣ Non-SFHAs: All B, C and X zones (may be eligible for preferred rates).
- ▣ CBRS (Coastal Barrier Resource System)

What is CBRS/CBRA?

- ▣ Coastal Barrier Resources Act of 1982: Designates certain portions of the Gulf coast and East coast as undeveloped coastal barriers. Shown on a FIRM. Created to reduce loss of life by discouraging development in high risk areas and to preserve ecological integrity of areas CONGRESS designates as a CBRS.
- ▣ Coastal Barrier Improvement Act of 1990: Adds and deletes CBRS areas and adds OPAs.
- ▣ OPAs: Otherwise Protected Areas.
- ▣ NFIP Flood Insurance may not be available in these areas.

What is a CBRS/CBRA?

- ▣ Flood Insurance may NOT be available in CBRS/OPAs
- ▣ Eligibility under the Coastal Barrier Resource Act of 1982: building permit issued, walled and roofed before 10-1-83; building not substantially improved on or after 10-1-83.
- ▣ Eligibility under Coastal Barrier Improvement Act of 1990: Same rules as above but using date of 11-16-90.
- ▣ OPAs: Same rules as above but using date of 11-16-91 OR building is used in a manner consistent with the purpose for which the area is protected regardless of the date of construction.
- ▣ More info at www.fema.gov/national-flood-insurance-program/coastal-barrier-resource-system.

NFIP Primary Rating Factors

- ❑ Flood Zone
- ❑ Pre-FIRM vs. Post-FIRM Construction
- ❑ Foundation Type
- ❑ Enclosure Size and Materials in SFHAs
- ❑ Enclosure Permanent Openings in SFHAs
- ❑ Secondary Homes (eff. 4-1-15)
- ❑ Commercial Buildings (eff. 4-1-16)
- ❑ Prior Losses

How Does a Flood Zone Change Impact Flood Insurance Cost?

Zone Change Into SFHA:

Post-FIRM buildings require Elevation Certificate (EC) for elevation rating.

There is a Newly Mapped procedure (enclosed) to allow the property to be rated as a non-SFHA building for 1 year.

Lenders will require flood insurance on all properties in a SFHA.

Zone Change Out of SFHA:

Lender no longer requires flood insurance.

Flood insurance becomes a voluntary purchase for buildings with a mortgage.

Rates may or may not be lower out of a SFHA.

Resources

- ▣ Your Insurance Agent
- ▣ Community official: Palm Beach County Emergency Management
Gustavo Vilchez 561-712-6481 (FIRM Remapping)
- ▣ www.fema.gov/business/nfip
 - ▣ Electronic copy of NFIP manual
 - ▣ Workshops & Trainings
 - ▣ Statistics
- ▣ www.fema.gov/hazard/map/firm
 - ▣ Flood Map Information
 - ▣ Having a flood map updated

ATTACHMENTS

FLOOD INSURANCE MANUAL

Coastal Barrier Resources System
(CBRS)
(11/1/15 edition)

COASTAL BARRIER RESOURCES SYSTEM

The Coastal Barrier Resources Act (Pub. L. 97-348) and the Coastal Barrier Improvement Act of 1990 (Pub. L. 101-591) are Federal laws that were enacted on October 18, 1982, and November 16, 1990, respectively. The legislation was implemented as part of a Department of the Interior (DOI) initiative to minimize loss of human life by discouraging development in high-risk areas, reduce wasteful expenditures of Federal resources, and preserve the ecological integrity of areas Congress designates as a Coastal Barrier Resources System (CBRS) and Otherwise Protected Areas (OPAs). The laws provide this protection by prohibiting all Federal expenditures or financial assistance, including flood insurance, for residential or commercial development in areas so identified.

The 1990 Act amends the 1982 Act by adding and deleting CBRS areas and by adding OPAs. As a result, revisions are made to the Flood Insurance Rate Maps (FIRMs) for the affected communities. Both of the laws provided 1-year grace periods for the National Flood Insurance Program (NFIP) to comply with the statutory requirements: October 1, 1983, for the 1982 Act and November 16, 1991, for the 1990 Act. The 1-year grace period for the 1990 Act applies only to the OPAs. New CBRS areas established by the 1990 Act have no grace period.

To determine whether a building is eligible for flood insurance coverage, the agent/producer should consult the list of communities where coastal barriers and/or OPAs have been identified. The list is included in this section. The community's map should *always* be reviewed to determine if the property to be insured is located in a designated CBRS area or OPA.

A listing of NFIP Communities that have CBRS areas is available for review on the Federal Emergency Management Agency (FEMA) website at <http://www.fema.gov/national-flood-insurance-program/coastal-barrier-resources-system>. The website page is for information and notification purposes only. The website does not determine flood insurance eligibility or status in relation to a CBRS or an OPA; it merely indicates whether an NFIP Community contains a portion of the CBRS or an OPA. Further study of the FIRM and property location and/or the building's date of construction in relation to the CBRS designation date is necessary to determine whether a specific property is eligible for flood insurance.

Buildings may be eligible for flood insurance even if they are located within such areas. Eligibility depends upon which Act identified that community as having such areas.

Eligibility under the 1982 Act for a building in a CBRS area requires that:

- A legally valid building permit for the construction of the building was issued prior to October 1, 1983; *and*
- The building was built (walled and roofed) prior to October 1, 1983; *and*
- The building was not substantially improved or substantially damaged on or after October 1, 1983.

Eligibility under the 1990 Act for a building in a CBRS area or an OPA requires that:

- For CBRS areas:
 - A legally valid building permit for the construction of the building was issued prior to November 16, 1990; *and*
 - The actual start of construction of the building was prior to November 16, 1990; *and*
 - The building was not substantially improved or substantially damaged on or after November 16, 1990.
- For OPAs:
 - A legally valid building permit for the construction of the building was issued prior to November 16, 1991; *and*
 - A building in an OPA was built (walled and roofed) no later than November 16, 1991; *and*
 - The building was not substantially improved or substantially damaged after November 16, 1991.

OR

- The building is used in a manner consistent with the purpose for which the area is protected, regardless of the date of construction.

Eligibility under other CBRS amendments is based on the preceding rules applied to the date the insurance prohibition became effective.

When an Application for flood insurance is submitted for buildings located in CBRS and/or OPA communities, the following types of documentation must be submitted as evidence of eligibility by the agent/producer writing through the NFIP Direct:

- For buildings built on or after the date the insurance prohibition became effective, a legible copy of the

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Baldwin County (Uninc. Areas)	AL	015000	Y	Y
Dauphin Island (Town)	AL	010418	Y	Y
Gulf Shores (City)	AL	015005	N	Y
Mobile County (Uninc. Areas)	AL	015008	Y	Y
Orange Beach (City)	AL	015011	N	Y
Branford (Town)	CT	090073	Y	N
Bridgeport (City)	CT	090002	Y	Y
Clinton (Town)	CT	090061	Y	Y
East Lyme (Town)	CT	090096	Y	N
Fenwick (Borough)	CT	090187	Y	N
Groton (City)	CT	090126	Y	N
Groton (Town)	CT	090097	Y	Y
Groton Long Point Association	CT	090167	Y	N
Madison (Town)	CT	090079	Y	N
Milford (City)	CT	090082	Y	Y
New Haven (City)	CT	090084	N	Y
New London (City)	CT	090100	Y	N
Norwalk (City)	CT	090012	Y	Y
Old Lyme (Town)	CT	090103	Y	N
Old Saybrook (Town)	CT	090069	Y	N
Stonington (Borough)	CT	090193	Y	N
Stonington (Town)	CT	090106	Y	N
Stratford (Town)	CT	090016	N	Y
Waterford (Town)	CT	090107	Y	N
West Haven (City)	CT	090092	N	Y
Westbrook (Town)	CT	090070	Y	N
Westport (Town)	CT	090019	Y	Y
Dewey Beach (Town)	DE	100056	Y	N
Fenwick Island (Town)	DE	105084	N	Y
Kent County (Uninc. Areas)	DE	100001	Y	Y
Lewes (City)	DE	100041	N	Y
Little Creek (Town)	DE	100015	N	Y
Rehoboth Beach (City)	DE	105086	Y	Y
Slaughter Beach (Town)	DE	100050	Y	Y
Sussex County (Uninc. Areas)	DE	100029	Y	Y
Bay County (Uninc. Areas)	FL	120004	Y	Y
Bonita Springs (City)	FL	120680	Y	Y
Bradenton Beach (City)	FL	125091	Y	Y
Brevard County (Uninc. Areas)	FL	125092	Y	Y
Cedar Key (City)	FL	120373	Y	Y
Charlotte County (Uninc. Areas)	FL	120061	Y	Y
Clearwater (City)	FL	125096	Y	Y
Collier County (Uninc. Areas)	FL	120067	Y	Y
Cutler Bay (Town)	FL	120218	N	Y
Dania Beach (City)	FL	120034	N	Y
Destin (City)	FL	125158	Y	Y
Dixie County (Uninc. Areas)	FL	120336	Y	N
Dunedin (City)	FL	125103	Y	Y
Escambia County (Uninc. Areas)	FL	120080	Y	Y
Fernandina Beach (City)	FL	120172	N	Y

current NFIP Community map marked to show the exact location of the building and that the building is not in a CBRS area or an OPA.

Other forms of acceptable documentation include the following:

- A letter indicating that the building is not located in a CBRS area or an OPA, signed and dated by a local community official;
- An EC indicating that the building is not located in a CBRS area or an OPA, signed and dated by a surveyor, an engineer, an architect, or a local community official;
- A flood zone determination certification indicating that the building is not located in a CBRS area or an OPA, that guarantees the accuracy of the information; or
- A letter from the U.S. Fish & Wildlife Service stating that the building is not located in a CBRS area or an OPA.

For buildings in CBRS areas and OPAs:

A legally valid building permit, or if the building permit was lost or destroyed, a written statement to this effect signed by the community official responsible for the building permits will be accepted in lieu of the building permit; *and*

A statement by a responsible community official that:

- The walls and roof of the building were in place (1982 Act) or the start of construction took place (1990 Act) before the date the insurance prohibition became effective; *and*
- The building was not substantially improved or substantially damaged on or after the date the insurance prohibition became effective.

Other forms of acceptable documentation include the following:

- First mortgage financing records;
- Property tax records;

- Electrical permit records;
- On-site septic or sewer system records;
- State Coastal Zone Management Agency records; *and*
- State Wetlands Program permit records.

For structures in OPAs only:

Certification from the governmental body overseeing the area indicating that a building in an OPA is used in a manner consistent with the purpose for which the area is protected may be submitted in lieu of the above documentation.

If an agent/producer writing through the NFIP Direct is uncertain whether a building is located in a CBRS area or an OPA, the following procedure should be used:

- Do not collect the premium.
- Mark the Application "Possible CBRS."
- Attach a legible copy of the NFIP Community map showing the community number, map suffix, and FIRM date. Mark the risk's location on the FIRM.
- Attach a copy of a plat survey or tax map.
- Provide a copy of a county or municipal street map that shows the area surrounding the property location and has the risk's location clearly marked. Also provide, if available, an aerial photograph that shows the property in question, a metes-and-bounds description of the location, and/or the latitude and longitude of the property.
- Provide a statement explaining the mechanism used to identify whether the property is located inside or outside the CBRS/OPA (e.g., contacted community's tax office).
- Mail all documentation listed above and a legible photocopy of the Application to NFIP Servicing Agent, P.O. Box 29138, Shawnee Mission, KS 66201-9138.

An agent/producer writing through an insurer should contact that insurer for guidance.

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Sarasota (City)	FL	125150	N	Y
Sarasota County (Uninc. Areas)	FL	125144	Y	Y
Sewall's Point (Town)	FL	120164	Y	N
St. Augustine (City)	FL	125145	Y	Y
St. Augustine Beach (City)	FL	125146	N	Y
St. Johns County (Uninc. Areas)	FL	125147	Y	Y
St. Lucie County (Uninc. Areas)	FL	120285	Y	Y
St. Petersburg (City)	FL	125148	N	Y
Titusville (City)	FL	125152	N	Y
Venice (City)	FL	125154	N	Y
Volusia County (Uninc. Areas)	FL	125155	Y	Y
Wakulla County (Uninc. Areas)	FL	120315	Y	N
Walton County (Uninc. Areas)	FL	120317	Y	Y
Brunswick (City)	GA	130093	N	Y
Bryan County (Uninc. Areas)	GA	130016	N	Y
Camden County (Uninc. Areas)	GA	130262	Y	Y
Chatham County (Uninc. Areas)	GA	130030	Y	Y
Darien (City)	GA	130131	N	Y
Glynn County (Uninc. Areas)	GA	130092	Y	Y
Jekyll Island State Park Authority	GA	130201	N	Y
Liberty County (Uninc. Areas)	GA	130123	N	Y
McIntosh County (Uninc. Areas)	GA	130130	N	Y
Cameron Parish (Uninc. Areas)	LA	225194	Y	Y
Grand Isle (Town)	LA	225197	Y	Y
Iberia Parish (Uninc. Areas)	LA	220078	N	Y
Jefferson Parish (Uninc. Areas)	LA	225199	Y	Y
Lafourche Parish (Uninc. Areas)	LA	225202	Y	N
Plaquemines Parish (Uninc. Areas)	LA	220139	Y	Y
St. Bernard Parish (Uninc. Areas)	LA	225204	Y	Y
St. Mary Parish (Uninc. Areas)	LA	220192	Y	N
Terrebonne Parish (Uninc. Areas)	LA	225206	Y	N
Vermilion Parish (Uninc. Areas)	LA	220221	Y	Y
Aquinnah (Town)	MA	250070	Y	Y
Barnstable (Town)	MA	250001	Y	Y
Beverly (City)	MA	250077	Y	N
Boston (City)	MA	250286	Y	Y
Bourne (Town)	MA	255210	Y	N
Brewster (Town)	MA	250003	Y	N
Chatham (Town)	MA	250004	Y	Y
Chilmark (Town)	MA	250068	Y	Y
Cohasset (Town)	MA	250236	Y	N
Dartmouth (Town)	MA	250051	Y	Y
Dennis (Town)	MA	250005	Y	Y
Duxbury (Town)	MA	250263	Y	N
Eastham (Town)	MA	250006	Y	Y
Edgartown (Town)	MA	250069	Y	Y
Essex (Town)	MA	250080	Y	N
Fairhaven (Town)	MA	250054	Y	N
Falmouth (Town)	MA	255211	Y	N
Gloucester (City)	MA	250082	Y	N

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Islesboro (Town)	ME	230256	Y	N
Jonesport (Town)	ME	230138	Y	N
Kennebunk (Town)	ME	230151	Y	N
Kittery (Town)	ME	230171	Y	N
Lubec (Town)	ME	230139	Y	N
Machiasport (Town)	ME	230141	Y	N
Milbridge (Town)	ME	230142	N	Y
Ogunquit (Town)	ME	230632	N	Y
Perry (Town)	ME	230319	Y	N
Phippsburg (Town)	ME	230120	Y	Y
Portland (City)	ME	230051	Y	N
Roque Bluffs (Town)	ME	230322	Y	Y
Scarborough (Town)	ME	230052	Y	N
Steuben (Town)	ME	230323	Y	Y
Wells (Town)	ME	230158	Y	Y
York (Town)	ME	230159	Y	N
Allouez (Township)	MI	261414	Y	N
Alpena (City)	MI	260010	Y	N
Alpena (Township)	MI	260011	Y	N
Arcadia (Township)	MI	260306	Y	N
Arvon (Township)	MI	261078	Y	N
Bay De Noc (Township)	MI	260685	Y	N
Blaine (Township)	MI	260027	Y	N
Brownstown (Charter Township)	MI	260218	Y	N
Cedarville (Township)	MI	260659	Y	N
Clark (Township)	MI	260759	Y	N
DeTour (Township)	MI	260775	Y	N
Drummond Island (Township)	MI	260803	Y	N
Ensign (Township)	MI	260752	Y	N
Frenchtown (Township)	MI	260146	Y	N
Garfield (Township)	MI	260766	Y	N
Hendricks (Township)	MI	260806	Y	N
Houghton (Township)	MI	260799	Y	N
Hudson (Township)	MI	260807	Y	N
Huron (Township)	MI	260415	Y	N
LaSalle (Township)	MI	260148	Y	N
Luna Pier (City)	MI	260150	Y	N
McMillan (Township)	MI	260487	Y	N
Moran (Township)	MI	260443	Y	N
Mueller (Township)	MI	261732	Y	N
Onota (Township)	MI	260345	Y	N
Pointe Aux Barques (Township)	MI	260617	Y	N
Port Austin (Township)	MI	260290	Y	N
Powell (Township)	MI	260452	Y	N
Pulawski (Township)	MI	261862	Y	N
St. Ignace (Township)	MI	260444	Y	N
White River (Township)	MI	260299	Y	N
Whitefish (Township)	MI	260321	Y	N
Whitney (Township)	MI	260018	Y	N
Duluth (City)	MN	270421	Y	N

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Old Bridge (Township)	NJ	340265	Y	N
Port Republic (City)	NJ	340016	N	Y
Rumson (Borough)	NJ	345316	Y	N
Sea Bright (Borough)	NJ	345317	Y	Y
Stafford (Township)	NJ	340393	Y	Y
Stone Harbor (Borough)	NJ	345323	Y	N
Union Beach (Borough)	NJ	340331	Y	N
Upper (Township)	NJ	340159	N	Y
West Cape May (Borough)	NJ	340160	N	Y
Asharoken (Village)	NY	365333	Y	N
Babylon (Town)	NY	360790	Y	Y
Belle Terre (Village)	NY	361532	Y	N
Brookhaven (Town)	NY	365334	Y	Y
Brownville (Town)	NY	361063	Y	N
Cape Vincent (Town)	NY	361062	Y	N
East Hampton (Town)	NY	360794	Y	Y
East Hampton (Village)	NY	360795	Y	N
Ellisburg (Town)	NY	360334	Y	N
Evans (Town)	NY	360240	Y	N
Freeport (Village)	NY	360464	Y	N
Glen Cove (City)	NY	360465	N	Y
Head of the Harbor (Village)	NY	361513	Y	N
Hempstead (Town)	NY	360467	Y	Y
Henderson (Town)	NY	360338	Y	N
Hounsfield (Town)	NY	360340	Y	N
Huntington (Town)	NY	360796	Y	Y
Huntington Bay (Village)	NY	361543	Y	N
Islip (Town)	NY	365337	Y	Y
Lattingtown (Village)	NY	360474	Y	Y
Lloyd Harbor (Village)	NY	360799	Y	Y
Lyme (Town)	NY	360343	Y	N
New Haven (Town)	NY	360655	Y	N
New York (City)	NY	360497	N	Y
Nissequogue (Village)	NY	361510	Y	N
North Haven (Village)	NY	360800	Y	Y
North Hempstead (Town)	NY	360482	Y	Y
Ocean Beach (Village)	NY	365339	N	Y
Old Field (Village)	NY	361545	Y	N
Oswego (City)	NY	360656	Y	N
Oswego (Town)	NY	360657	Y	N
Oyster Bay (Town)	NY	360483	Y	Y
Parma (Town)	NY	360425	Y	N
Poquott (Village)	NY	361518	Y	N
Port Jefferson (Village)	NY	360804	Y	Y
Richland (Town)	NY	360660	Y	N
Riverhead (Town)	NY	360805	Y	Y
Sagaponack (Village)	NY	361487	Y	N
Saltaire (Village)	NY	365341	N	Y
Sands Point (Village)	NY	360492	Y	Y
Sandy Creek (Town)	NY	360661	Y	N

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Seabrook Island (Town)	SC	450256	Y	N
Aransas County (Uninc. Areas)	TX	485452	Y	Y
Aransas Pass (City)	TX	485453	N	Y
Brazoria County (Uninc. Areas)	TX	485458	Y	Y
Calhoun County (Uninc. Areas)	TX	480097	Y	Y
Cameron County (Uninc. Areas)	TX	480101	Y	Y
Chambers County (Uninc. Areas)	TX	480119	Y	N
Corpus Christi (City)	TX	485464	Y	Y
Galveston (City)	TX	485469	N	Y
Galveston County (Uninc. Areas)	TX	485470	Y	Y
Jefferson County (Uninc. Areas)	TX	480385	Y	Y
Kenedy County (Uninc. Areas)	TX	481230	N	Y
Kleberg County (Uninc. Areas)	TX	480423	Y	Y
Matagorda County (Uninc. Areas)	TX	485489	Y	Y
Nueces County (Uninc. Areas)	TX	485494	N	Y
Port Aransas (City)	TX	485498	N	Y
Port Arthur (City)	TX	485499	Y	Y
Quintana (Village)	TX	481301	Y	Y
South Padre Island (Town)	TX	480115	N	Y
Texas City (City)	TX	485514	Y	Y
Willacy County (Uninc. Areas)	TX	480664	Y	Y
Accomack County (Uninc. Areas)	VA	510001	Y	Y
Cape Charles (Town)	VA	510106	Y	N
Chincoteague (Town)	VA	510002	N	Y
Gloucester County (Uninc. Areas)	VA	510071	Y	N
Hampton (City)	VA	515527	Y	Y
Lancaster County (Uninc. Areas)	VA	510084	Y	N
Mathews County (Uninc. Areas)	VA	510096	Y	N
Middlesex County (Uninc. Areas)	VA	510098	Y	N
Northampton County (Uninc. Areas)	VA	510105	Y	Y
Northumberland County (Uninc. Areas)	VA	510107	Y	Y
Poquoson (City)	VA	510183	N	Y
Tangier (Town)	VA	510004	Y	N
Virginia Beach (City)	VA	515531	N	Y
Wachapreague (Town)	VA	510005	Y	N
Westmoreland County (Uninc. Areas)	VA	510250	Y	N
Virgin Islands (Territory)	VI	780000	Y	Y
Bayfield County (Uninc. Areas)	WI	550539	Y	N
Brown County (Uninc. Areas)	WI	550020	Y	N
Manitowoc County (Uninc. Areas)	WI	550236	Y	N
Marinette County (Uninc. Areas)	WI	550259	Y	N

FLOOD INSURANCE MANUAL

Flood Zones
(11/1/15 edition)

FLOOD MAPS

I. OVERVIEW

The Federal Emergency Management Agency (FEMA) provides all participating communities with copies of their flood maps. The maps are generally kept in community planning or building permit departments where they should be available for review.

Additional information about flood maps can be obtained at the FEMA Flood Map Service Center (MSC) website (<http://msc.fema.gov>). The MSC is the official public source for flood hazard information produced in support of the National Flood Insurance Program (NFIP).

A. Types of Flood Maps

FEMA produces 2 types of maps for rating flood insurance. For detailed information, refer to *Answers to Questions About the NFIP* (F-084).

1. Flood Hazard Boundary Map (FHBM) – Initial flood hazard identification generally used for Emergency Program communities.
2. Flood Insurance Rate Map (FIRM) – Generally used for Regular Program communities. Some Regular Program communities may use a map originally published as an FHBM; however, a letter will accompany the map in conjunction with conversion to the Regular Program stating that the map is to be considered a FIRM.

Countywide FIRMs are official sources of flood risk data for several communities that supersede all previous versions of the FEMA flood hazard maps for the communities covered. Countywide FIRMs show flooding information for the entire geographic area of a county, including the incorporated communities within the county.

B. Map Information

The date of the current effective map version for a community can be obtained by calling the appropriate community official or by calling the National Flood Insurance Program (NFIP) office at the toll-free number. Maps provide community name, community number, suffix, panel number, map type, and the map effective date. (See FIRM panel example at the end of this section.)

1. The maps may have 1 panel or multiple panels. Most Z-fold maps have multiple panels. Flat maps generally consist of only 1 panel.
2. For multiple-panel maps, individual panels are identified on a community map index.

3. Panel numbers are listed for that community's map in numerical sequence. FHBMs and FIRMs are drawn to show:

- Community boundaries;
- Special Flood Hazard Areas (SFHAs); *and*
- Areas not included in a community's map. A community may be physically located within the overall geographical area, but actually stand on its own as a separate community. Therefore, this community would be shown on a separate map.

4. Each panel has a panel number and community number. When there is only 1 panel (i.e., a flat map), the community number will consist of only 6 digits.

Example: Monterey County, CA 060195-1025 (The first 2 digits of the number identify the state and the next 4 digits identify the community. The last 4 digits identify the map panel.)

5. Most FIRMs also show:

- Flood Zones;
- Base Flood Elevations; *and/or*
- Base Flood Depths.

C. Communities with Unpublished Maps

These are communities without formally identified SFHAs that chose to have flood insurance coverage available even though the local flooding problems are too small to map. For any such community in the Regular Program, all areas within that community are treated as Zone C or X.

D. Unmapped Areas in Communities with Maps

The flood hazards for some areas within mapped communities remain undetermined and are unmapped. These unmapped areas are to be treated as Zone D. The designation of Zone D can also be used for rating when a community incorporates portions of another community's area where no map has been prepared.

II. MAP ZONES

A. Special Flood Hazard Areas

1. Zone A

The lowest floor elevation is required and the Base Flood Elevations (BFEs) are not provided.

2. Zones A1–A30

The lowest floor elevation is required and the BFEs are provided.

If, after plotting the location on the FIRM, the FEMA examiner finds that the property and/or building is not shown in the SFHA, then the Determination will be “Out As Shown” rather than “Removed.” The FEMA Out-As-Shown Determination will state that the property or building is correctly shown outside the SFHA and, therefore, the mandatory flood insurance requirement does not apply.

An Out-As-Shown Determination does not require elevations. The minimum requirements to make an Out-As-Shown Determination are as follows:

- A photocopy of the FIRM panel (including the title block) that shows the area in which the property is located.
- Section A of the MT-EZ form, which is found in the MT-EZ application package and can be obtained from the FEMA website at <https://www.fema.gov/media-library/assets/documents/8001>, or by calling the toll-free number listed below.
- A copy of the subdivision Plat Map of the area, showing the recordation data (i.e., Book/Volume and Page numbers) and containing the recorder’s seal.

OR

- A copy of the deed for the property, showing the recordation information (i.e., Book/Volume and Page numbers) and containing the recorder’s seal, accompanied by a tax assessor’s or other suitable map showing the surveyed location of the property and at least 2 street intersections that are also shown on FEMA’s FIRM.

In some cases, additional information may be required to make a determination.

Questions about LOMAs may be directed to the FEMA Map Information eXchange (FMIX) toll-free information line at 1-877-FEMA-MAP (1-877-336-2627).

B. Letter of Map Revision (LOMR)

A LOMR is an official revision to the currently effective FEMA map. It is used to change flood zones, floodplain and floodway delineations, flood elevations, and planimetric features. All requests for LOMRs must be made to FEMA through the chief executive officer of the community, since it is the community that must adopt any changes and revisions to the map. A LOMR is usually followed by a physical map revision.

C. Physical Map Revision

A physical map revision is an official republication of a map to effect changes to flood insurance zones, floodplain delineations, flood elevations, floodways, and planimetric features.

The community’s chief executive officer can submit scientific and technical data to FEMA to support the request for a map revision. The data will be analyzed, and the map will be revised if warranted.

NOTE: To verify past rating determinations and to establish floodplain management compliance requirements, old maps should be retained.

V. FLOOD HAZARD PRODUCTS

Flood maps and related products can be ordered through the FEMA MSC website (<http://msc.fema.gov>) free of charge. All other related products can be found with the integrated Search All Products feature that allows users to find and download all products for a geographic area. The enhanced Search By Address feature enables download of FIRMs and Letters of Map Change directly from the search results page.

For questions regarding the MSC website or other flood-mapping-related questions, please visit the self-service options on the website or contact a Map Specialist with FMIX by calling the toll-free number, 1-877-336-2627, from 8:00 a.m. to 6:30 p.m., Monday through Friday.

FLOOD INSURANCE MANUAL

Newly Mapped
(11/1/15 edition)

NEWLY MAPPED

I. GENERAL DESCRIPTION

The Newly Mapped procedure applies to properties previously in Zones B, C, X, or D that have been newly mapped into a Special Flood Hazard Area (SFHA). This procedure also applies to policies previously issued under the Preferred Risk Policy Eligibility Extension that are renewing on or after April 1, 2015. The Newly Mapped procedure does not apply to properties mapped into the SFHA by the initial Flood Insurance Rate Map (FIRM).

For 1–4 family dwellings, the maximum coverage combination is \$250,000 building and \$100,000 contents. For other residential buildings, the maximum coverage combination is \$500,000 building and \$100,000 contents. Up to \$100,000 contents-only coverage is available for all residential properties.

For non-residential business, and other non-residential properties, the maximum coverage combination is \$500,000 building and \$500,000 contents. Up to \$500,000 contents-only coverage is available.

Only 1 building can be insured per policy, and only 1 policy can be written on each building.

II. ELIGIBILITY REQUIREMENTS

A. Eligibility

To be eligible for coverage under the Newly Mapped procedure, the building must meet the following criteria:

- Properties newly mapped into an SFHA on or after April 1, 2015, are eligible for the Newly Mapped procedure if the applicant obtains coverage that is effective within 12 months of the map revision date.
- Properties newly mapped into an SFHA between October 1, 2008, and March 31, 2015, are eligible for the Newly Mapped procedure if the applicant obtains coverage that is effective before April 1, 2016.
- Policies validly issued under the PRP Eligibility Extension prior to April 1, 2015, must be renewed with the Newly Mapped procedure on the first effective date on or after April 1, 2015.

For the purpose of determining the flood zone, the agent/producer may use the FIRM in effect at the time of application and presentment of premium.

B. Occupancy

Combined building/contents amounts of insurance are available for owners of all eligible occupancy types — 1–4 family properties (including individual condominium units in residential condominium buildings), other residential properties, and non-residential business, and other non-residential properties.

Contents-only coverage is available for tenants and owners of all eligible occupancies, except when contents are located entirely in a basement.

C. Loss History

A building's eligibility for the Newly Mapped procedure is based on the preceding requirements and on the building's flood loss history. If any of the following conditions exists within any 10-year period, regardless of any change(s) in ownership of the building, then the building is not eligible for the Newly Mapped procedure:

- 2 flood insurance claim payments for separate losses, each more than \$1,000; *or*
- 3 or more flood insurance claim payments for separate losses, regardless of amount; *or*
- 2 Federal flood disaster relief payments (including loans and grants) for separate occurrences, each more than \$1,000; *or*
- 3 Federal flood disaster relief payments (including loans and grants) for separate occurrences, regardless of amount; *or*
- 1 flood insurance claim payment and 1 Federal flood disaster relief payment (including loans and grants), each for separate losses and each more than \$1,000.

NOTE: Multiple losses at the same location within 10 days of each other are counted as 1 loss, with the payment amounts added together.

TABLE 1. PROPERTIES NEWLY MAPPED INTO AN SFHA COVERAGE LIMITS

COVERAGE TYPE	MAXIMUM LIMITS BY OCCUPANCY TYPE		
	1-4 FAMILY	OTHER RESIDENTIAL	NON-RESIDENTIAL BUSINESS, OTHER NON-RESIDENTIAL
Combined Building/Contents	\$250,000/\$100,000	\$500,000/\$100,000	\$500,000/\$500,000
Contents Only	\$100,000	\$100,000	\$500,000

is \$250.00. The HFIAA surcharge is not subject to agent commissions.

- The Federal Policy Fee of \$45 is included in the premium and is not subject to commission.
- The ICC Premium of \$5 for residential coverage up to \$230,000 and \$4 for coverage over \$230,000 is included in the premium. Deduct this amount if the risk is a condominium unit. The ICC Premium of \$5 for Non-Residential Business and Other Non-Residential coverage up to \$480,000 and \$4 for coverage over \$480,000 is included in the premium.

VIII. DEDUCTIBLES

The deductible for a Newly-Mapped-rated policy is \$1,000 each for both building and contents if the building coverage is less than or equal to \$100,000; if the building coverage is over \$100,000, the deductible is \$1,250, regardless of the insured building's construction date compared to the initial FIRM date. A contents-only policy will have a \$1,000 deductible.

IX. ENDORSEMENTS

A Newly-Mapped-rated policy may be endorsed to:

- Increase coverage mid-term. See the General Change Endorsement section in this manual for an example.
- Correct misratings, such as those due to an incorrect building description or community number.

X. CONVERSION OF A STANDARD-RATED POLICY TO A NEWLY-MAPPED-RATED POLICY DUE TO MISRATING

A policy written as a standard-rated policy and later found to be eligible for the Newly Mapped procedure may be endorsed or canceled and rewritten for only the current policy term.

The policy may be canceled/rewritten using Cancellation Reason 22 if both of the following conditions are met:

- The request to endorse or cancel/rewrite the policy is received during the current policy term; *and*
- No claim has been paid or is pending on the policy term being canceled.

The building and/or contents coverage on the Newly-Mapped-rated policy must be equal either to the building limit and/or contents limit issued under the standard-rated policy, or to the next-higher limit available under the Newly-Mapped-rated policy if there is no Newly-Mapped-rated policy option equal to the standard-rated policy building and/or contents limit.

For a standard-rated contents-only policy, the contents coverage will be equal to the limit issued under the standard-rated policy or the next-higher limit. If building coverage is desired, the policy should be endorsed for building and contents coverage with a 30-day waiting period applied.

XI. CONVERSION OF A NEWLY-MAPPED-RATED POLICY TO A STANDARD-RATED POLICY

A Newly-Mapped-rated policy must be canceled and rewritten as a standard-rated policy if the risk does not meet the Newly-Mapped-rated policy requirements on the policy effective date. (See the Eligibility Requirements subsection in this section.)

When converting a Newly-Mapped-rated policy to a standard-rated policy, all underwriting information must be obtained at the time of conversion, unless the information is contained in the underwriting file. The building and/or contents coverage on the new standard-rated policy cannot exceed the building limit and/or contents limit issued under the Newly-Mapped-rated policy.

The policyholder will have 30 days from notification to pay the additional premium due, or 60 days from notification to obtain additional information if needed to rate the policy, and then 30 days to pay the additional premium due. The premium due will be calculated from the beginning of the policy term to restore the originally requested limits without a waiting period. The policyholder has the option to reduce or delete coverage in order to wholly or partially reduce the underpayment amount.

If increased coverage limits are desired, the new standard-rated policy must be endorsed; the 30-day waiting period will apply.

**TABLE 3. COVERAGE LIMITS AND PREMIUMS FOR PROPERTIES
NEWLY MAPPED INTO AN SFHA ON OR AFTER OCTOBER 1, 2008^{1, 2, 3}**

1-4 FAMILY RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS⁴

WITH BASEMENT OR ENCLOSURE ⁵			WITHOUT BASEMENT OR ENCLOSURE ⁵		
BUILDING	CONTENTS	PREMIUM	BUILDING	CONTENTS	PREMIUM
\$ 20,000	\$ 8,000	\$196	\$ 20,000	\$ 8,000	\$165
\$ 30,000	\$ 12,000	\$234	\$ 30,000	\$ 12,000	\$203
\$ 50,000	\$ 20,000	\$296	\$ 50,000	\$ 20,000	\$265
\$ 75,000	\$ 30,000	\$347	\$ 75,000	\$ 30,000	\$310
\$100,000	\$ 40,000	\$379	\$100,000	\$ 40,000	\$343
\$125,000	\$ 50,000	\$397	\$125,000	\$ 50,000	\$361
\$150,000	\$ 60,000	\$419	\$150,000	\$ 60,000	\$384
\$200,000	\$ 80,000	\$462	\$200,000	\$ 80,000	\$419
\$250,000	\$100,000	\$493	\$250,000	\$100,000	\$445

RESIDENTIAL CONTENTS-ONLY COVERAGE

CONTENTS ABOVE GROUND LEVEL MORE THAN 1 FLOOR		ALL OTHER LOCATIONS (BASEMENT-ONLY NOT ELIGIBLE)	
CONTENTS	PREMIUM	CONTENTS	PREMIUM
\$ 8,000	\$68	\$ 8,000	\$91
\$ 12,000	\$88	\$ 12,000	\$121
\$ 20,000	\$126	\$ 20,000	\$165
\$ 30,000	\$143	\$ 30,000	\$189
\$ 40,000	\$158	\$ 40,000	\$209
\$ 50,000	\$173	\$ 50,000	\$230
\$ 60,000	\$188	\$ 60,000	\$251
\$ 80,000	\$216	\$ 80,000	\$275
\$100,000	\$246	\$100,000	\$300

- 1 Add either a \$25.00 or a \$250.00 surcharge to the premium in accordance with the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA). The HFIAA surcharge is \$25.00 for policies covering primary residences, including contents-only policies, if the named insured's primary residence is a single-family dwelling, an individual condominium unit, an apartment unit, or a unit in a cooperative building. For all other policies, the HFIAA surcharge is \$250.00.
- 2 Add the \$50 Probation Surcharge, if applicable.
- 3 Premium includes a 15% Reserve Fund Assessment and \$45 Federal Policy Fee.
- 4 Premium includes ICC Premium of \$5 for residential building coverage up to \$230,000 and \$4 for coverage over \$230,000. Deduct this amount if the risk is a condominium unit.
- 5 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces with an attached garage without proper openings.
- 6 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces, including those with an attached garage that have proper openings.

**TABLE 5. COVERAGE LIMITS AND PREMIUMS FOR PROPERTIES
NEWLY MAPPED INTO AN SFHA ON OR AFTER OCTOBER 1, 2008^{1, 2, 3}**

**NON-RESIDENTIAL BUSINESS OR OTHER NON-RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS⁴
With Basement or Enclosure⁵**

CONTENTS COVERAGE		\$50,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	\$350,000	\$400,000	\$450,000	\$500,000
BUILDING COVERAGE	\$ 50,000	\$1,106	\$1,423	\$1,727	\$2,015	\$2,291	\$2,554	\$2,802	\$3,035	\$3,256	\$3,463
	\$100,000	\$1,563	\$1,881	\$2,183	\$2,473	\$2,748	\$3,010	\$3,259	\$3,493	\$3,713	\$3,920
	\$150,000	\$1,882	\$2,196	\$2,496	\$2,781	\$3,055	\$3,314	\$3,560	\$3,792	\$4,009	\$4,214
	\$200,000	\$2,063	\$2,378	\$2,677	\$2,962	\$3,236	\$3,495	\$3,742	\$3,973	\$4,191	\$4,396
	\$250,000	\$2,190	\$2,504	\$2,804	\$3,089	\$3,363	\$3,622	\$3,868	\$4,099	\$4,319	\$4,524
	\$300,000	\$2,330	\$2,644	\$2,945	\$3,230	\$3,503	\$3,762	\$4,008	\$4,241	\$4,458	\$4,663
	\$350,000	\$2,487	\$2,800	\$3,099	\$3,386	\$3,658	\$3,917	\$4,162	\$4,395	\$4,613	\$4,818
	\$400,000	\$2,588	\$2,902	\$3,201	\$3,487	\$3,760	\$4,020	\$4,265	\$4,496	\$4,714	\$4,919
	\$450,000	\$2,704	\$3,018	\$3,317	\$3,605	\$3,876	\$4,136	\$4,381	\$4,613	\$4,831	\$5,035
	\$500,000	\$2,832	\$3,145	\$3,445	\$3,731	\$4,004	\$4,264	\$4,509	\$4,740	\$4,958	\$5,163

**NON-RESIDENTIAL BUSINESS OR OTHER NON-RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS⁴
Without Basement or Enclosure⁶**

CONTENTS COVERAGE		\$50,000	\$100,000	\$150,000	\$200,000	\$250,000	\$300,000	\$350,000	\$400,000	\$450,000	\$500,000
BUILDING COVERAGE	\$ 50,000	\$699	\$868	\$1,030	\$1,184	\$1,331	\$1,470	\$1,603	\$1,728	\$1,845	\$1,956
	\$100,000	\$934	\$1,103	\$1,264	\$1,420	\$1,566	\$1,706	\$1,838	\$1,964	\$2,081	\$2,191
	\$150,000	\$1,099	\$1,266	\$1,427	\$1,580	\$1,724	\$1,862	\$1,994	\$2,118	\$2,234	\$2,343
	\$200,000	\$1,279	\$1,447	\$1,606	\$1,760	\$1,905	\$2,043	\$2,174	\$2,298	\$2,414	\$2,524
	\$250,000	\$1,400	\$1,568	\$1,728	\$1,881	\$2,027	\$2,164	\$2,295	\$2,419	\$2,535	\$2,644
	\$300,000	\$1,529	\$1,697	\$1,857	\$2,010	\$2,156	\$2,293	\$2,424	\$2,548	\$2,664	\$2,773
	\$350,000	\$1,598	\$1,766	\$1,927	\$2,079	\$2,225	\$2,363	\$2,494	\$2,617	\$2,733	\$2,842
	\$400,000	\$1,675	\$1,842	\$2,003	\$2,156	\$2,301	\$2,439	\$2,570	\$2,694	\$2,810	\$2,919
	\$450,000	\$1,759	\$1,927	\$2,086	\$2,238	\$2,385	\$2,523	\$2,654	\$2,777	\$2,893	\$3,002
	\$500,000	\$1,849	\$2,016	\$2,176	\$2,329	\$2,475	\$2,612	\$2,743	\$2,868	\$2,984	\$3,093

NON-RESIDENTIAL BUSINESS OR OTHER NON-RESIDENTIAL CONTENTS-ONLY COVERAGE

CONTENTS ABOVE GROUND LEVEL MORE THAN 1 FLOOR		ALL OTHER LOCATIONS (BASEMENT-ONLY NOT ELIGIBLE)	
CONTENTS	PREMIUM	CONTENTS	PREMIUM
\$ 50,000	\$204	\$ 50,000	\$430
\$100,000	\$296	\$100,000	\$640
\$150,000	\$388	\$150,000	\$848
\$200,000	\$480	\$200,000	\$1,056
\$250,000	\$572	\$250,000	\$1,264
\$300,000	\$664	\$300,000	\$1,472
\$350,000	\$756	\$350,000	\$1,680
\$400,000	\$848	\$400,000	\$1,888
\$450,000	\$939	\$450,000	\$2,097
\$500,000	\$1,031	\$500,000	\$2,305

- 1 Add either a \$25.00 or a \$250.00 surcharge to the premium in accordance with the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA). The HFIAA surcharge is \$25.00 for policies covering primary residences, including contents-only policies, if the named insured's primary residence is a single-family dwelling, an individual condominium unit, an apartment unit, or a unit in a cooperative building. For all other policies, the HFIAA surcharge is \$250.00.
- 2 Add the \$50 Probation Surcharge, if applicable.
- 3 Premium includes a 15% Reserve Fund Assessment and \$45 Federal Policy Fee.
- 4 Premium includes ICC Premium of \$5 for non-residential business or other non-residential building coverage up to \$480,000 and \$4 for coverage over \$480,000.
- 5 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces with an attached garage without proper openings.
- 6 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces, including those with an attached garage that have proper openings.

F. Property Location

PROPERTY LOCATION	NOTE: ONE BUILDING PER POLICY – BLANKET COVERAGE NOT PERMITTED. IS INSURED PROPERTY LOCATION SAME AS INSURED'S MAILING ADDRESS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ENTER PROPERTY ADDRESS. IF RURAL, ENTER LEGAL DESCRIPTION, OR GEOGRAPHIC LOCATION OF PROPERTY (DO NOT USE P.O. BOX). IDENTIFY ADDRESS TYPE: <input type="checkbox"/> STREET <input type="checkbox"/> LEGAL DESCRIPTION* <input type="checkbox"/> GEOGRAPHIC LOCATION
	FOR AN ADDRESS WITH MULTIPLE BUILDINGS AND/OR FOR A BUILDING WITH ADDITIONS OR EXTENSIONS, DESCRIBE THE INSURED BUILDING:
	* LEGAL DESCRIPTION MAY BE USED ONLY WHILE A BUILDING OR SUBDIVISION IS IN THE COURSE OF CONSTRUCTION OR PRIOR TO ESTABLISHING A STREET ADDRESS.

Check YES if the location of the property being insured is the same as the insured's mailing address entered in the "Insured Information" section of the form.

If NO is checked, provide the address or location of the property to be insured.

Check the appropriate address type.

The property location should be provided as a standard street address whenever possible. The use of the legal description may be applied only while a building or subdivision is in the course of construction or prior to establishing a street address. The policy must be endorsed to indicate the street address as soon as it is available. A descriptive geographic location may be used when a building is in a very rural area of the country and a standard street address is not available. Property location cannot be listed as a post office box. Leave the rest of the section blank unless there is more than 1 building at the property location.

For an address with multiple buildings at the same location, describe the one building to be insured (barn, silo, etc.). Submit a sketch showing the location of the insured building to assist the NFIP in matching the policy number to the specific building insured.

If applying for insurance for an addition or extension separately, describe the addition or extension to be insured.

G. 1st Mortgagee

1ST MORTGAGEE	NAME AND MAILING ADDRESS OF FIRST MORTGAGEE:
	LOAN NO.:
	IS INSURANCE REQUIRED UNDER MANDATORY PURCHASE? <input type="checkbox"/> YES <input type="checkbox"/> NO

Enter the name, mailing address, and loan number of the first mortgagee.

Check YES for Mandatory Purchase if the building is located within the SFHA and the purchase of flood insurance is being required by a federally regulated or insured lender; otherwise, check NO.

For condominium association applicants, do not enter the mortgagees for the individual condominium unit owners.

H. 2nd Mortgagee/Other

2ND MORTGAGEE/OTHER	NAME AND MAILING ADDRESS OF: <input type="checkbox"/> 2ND MORTGAGEE <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> OTHER IF OTHER, SPECIFY: _____
	LOAN NO.:
	IS INSURANCE REQUIRED UNDER MANDATORY PURCHASE? <input type="checkbox"/> YES <input type="checkbox"/> NO

Identify the second mortgagee, loss payee or other by checking the appropriate box. Enter the name, mailing address, and loan number.

Check YES for Mandatory Purchase if the initial purchase of flood insurance is in connection with the making, increasing, extension or renewal of a loan; otherwise, check NO.

For condominium association applicants, do not enter the mortgagees for the individual condominium unit owners.

If more than 2 additional mortgagee or disaster assistance agencies exist, provide the requested information on the insurance agency's letterhead and attach the letterhead to the application form. Include whether or not the insurance is required under Mandatory Purchase along with the mortgagee information.

I. Disaster Assistance

DISASTER ASSISTANCE	IS INSURANCE REQUIRED FOR DISASTER ASSISTANCE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, CHECK THE GOVERNMENT AGENCY: <input type="checkbox"/> SBA <input type="checkbox"/> FEMA <input type="checkbox"/> FHA <input type="checkbox"/> OTHER (SPECIFY): _____
	CASE FILE NO.:

Check YES if flood insurance is being required for disaster assistance. Identify the Government (disaster) agency and enter the insured's case file number; otherwise, check NO.

condominium buildings. This excludes hotels and motels with normal room rentals for less than 6 months.

- **Other Residential** – This is a residential building that is designed for use as a residential space for 5 or more families or a mixed-use building in which the total floor area devoted to non-residential uses is less than 25% of the total floor area within the building. This category includes condominium and apartment buildings as well as hotels, motels, tourist homes, and rooming houses where the normal occupancy of a guest is 6 months or more. Additional examples of other residential buildings include dormitories and assisted-living facilities.
- **Non-Residential Business** – A building in which the named insured is a licensed commercial enterprise carried out to generate income and the coverage is for:
 - a. A building designed as a non-habitational building;
 - b. A mixed-use building in which the total floor area devoted to residential uses is:
 - i. 50% or less of the total floor area within the building if the residential building is a single family property; or
 - ii. 75% or less of the total floor area within the building for all other residential properties; or
 - c. A building designed for use as office or retail space, wholesale space, hospitality space, or for similar uses.
- **Other Non-Residential** – This is a subcategory of nonresidential buildings; a non-habitational building that does not qualify as a business building or residential building. This category includes, but is not limited to, churches, schools, farm buildings (including grain bins and silos), garages, poolhouses, clubhouses and recreational buildings. A small business cannot use this category.

3. Is the Building a House of Worship?

ALL BUILDINGS	3. IS THE BUILDING A HOUSE OF WORSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------	--

Check YES if the intended use of the building is for a house of worship; otherwise, check NO.

4. Is the Building An Agricultural Structure?

ALL BUILDINGS	4. IS THE BUILDING AN AGRICULTURAL STRUCTURE? <input type="checkbox"/> YES <input type="checkbox"/> NO
---------------	--

Check YES if the intended use of the building is for agricultural purposes; otherwise, check NO.

5. Building Description (Check One)

ALL BUILDINGS	5. BUILDING DESCRIPTION (CHECK ONE) <input type="checkbox"/> MAIN HOUSE <input type="checkbox"/> DETACHED GUEST HOUSE <input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> BARN <input type="checkbox"/> APARTMENT BUILDING <input type="checkbox"/> APARTMENT - UNIT <input type="checkbox"/> COOPERATIVE BUILDING <input type="checkbox"/> COOPERATIVE - UNIT <input type="checkbox"/> WAREHOUSE <input type="checkbox"/> TOOL/STORAGE SHED <input type="checkbox"/> POOLHOUSE, CLUBHOUSE, RECREATION BUILDING <input type="checkbox"/> OTHER: _____
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Check the box that best indicates the insured building's description. If OTHER, provide the building description.

6. Condominium Unit

ALL BUILDINGS	6. CONDOMINIUM INFORMATION IS BUILDING IN A CONDOMINIUM FORM OF OWNERSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO IS COVERAGE FOR THE ENTIRE BUILDING? <input type="checkbox"/> YES <input type="checkbox"/> NO TOTAL NUMBER OF UNITS: _____ <input type="checkbox"/> HIGH-RISE <input type="checkbox"/> LOW-RISE IS COVERAGE FOR A CONDOMINIUM UNIT? <input type="checkbox"/> YES <input type="checkbox"/> NO
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• **Condominium Form of Ownership**

Check YES if the building is in a condominium form of ownership; otherwise, check NO.

• **Entire Building**

Check YES if coverage is for the entire building; otherwise, check NO.

NOTE: Multi-unit residential condominium buildings eligible for the RCBAP are not eligible for the PRP. A unit within such a building may be eligible for the PRP.

• **Total Number of Units**

Enter the total number of units in the building, regardless of the number of units intended for coverage.

NOTE: Multi-unit residential condominium buildings eligible for the RCBAP are not eligible for the PRP. A unit within such a building may be eligible for the PRP.

• **Condominium Unit**

Check YES if coverage is for a single condominium unit; otherwise, check NO.

- **Rental Property**

Check YES if the building is a rental property; otherwise, check NO.

- **Tenant's Coverage**

If the insured is a tenant, check YES; otherwise, check NO. If the tenant is requesting building coverage, check YES; otherwise, check NO. If YES, see the Notice in the Signature block on Page 2. The building owner must be named on the policy. If building coverage is purchased by a tenant due to a lease agreement, the tenant may also be named on the policy. Coverage for contents owned by the tenant must be written on a separate policy in the name of the tenant only. For additional guidance, refer to the Tenant's Coverage subsection in the General Rules section of this manual.

9. Building Information

ALL BUILDINGS	9. BUILDING INFORMATION	
	IS BUILDING IN THE COURSE OF CONSTRUCTION?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	IS BUILDING WALLED AND ROOFED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	IS BUILDING OVER WATER?	<input type="checkbox"/> NO <input type="checkbox"/> PARTIALLY <input type="checkbox"/> ENTIRELY
	IS BUILDING LOCATED ON FEDERAL LAND?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	IS BUILDING A SEVERE REPETITIVE LOSS PROPERTY?	<input type="checkbox"/> YES <input type="checkbox"/> NO

- **Building in the Course of Construction**

Check YES if the building is in the course of construction (if the building is not yet walled and roofed); otherwise, check NO.

- **Building Walled and Roofed**

Check YES if the building has at least 2 outside rigid walls and a fully secured roof; otherwise, check NO.

- **Building Over Water**

Check NO if the building is not located over water. Check PARTIALLY if any part of the building is over water. Check ENTIRELY if the building is completely over water. In tidal areas, use the mean high tide in determining whether the building is partially or entirely over water. For additional guidance on buildings over water, refer to the Building Property Eligibility subsection in the General Rules section of this manual.

- **Federal Land**

Check YES if the building is located on Federal land; otherwise, check NO. For additional guidance on federally leased properties, refer to the Leased Federal Properties section of this manual.

- **Severe Repetitive Loss Property**

Check YES if the building is an SRL property; otherwise check NO. If YES, the application must be sent to the NFIP Special Direct Facility for processing. For additional guidance, refer to the Severe Repetitive Loss section of this manual.

10. Elevated Building

ALL BUILDINGS	10. IS BUILDING ELEVATED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
---------------	--	--

Check YES if the building is an elevated building; otherwise, check NO. If YES, complete the Elevated Building section on Page 2. An elevated building is a building that has no basement and that has its lowest elevated floor raised above ground level by foundation walls, shear walls, posts, piers, pilings, or columns.

11. Basement, Enclosure, Crawlspace

ALL BUILDINGS	11. BASEMENT, ENCLOSURE, CRAWLSPACE	
	<input type="checkbox"/> NONE	
	<input type="checkbox"/> FINISHED BASEMENT/ENCLOSURE	
	<input type="checkbox"/> CRAWLSPACE	
	<input type="checkbox"/> UNFINISHED BASEMENT/ENCLOSURE	
	<input type="checkbox"/> SUBGRADE CRAWLSPACE	
	IS THE BASEMENT/SUBGRADE CRAWLSPACE FLOOR BELOW GRADE ON ALL SIDES?	
<input type="checkbox"/> YES <input type="checkbox"/> NO		

Select NONE if coverage is for an individual unit in a high-rise condominium building that is elevated with an enclosure.

Check whether the building contains:

- **Basement** – Any area of the building, including any sunken room or sunken portion of a room, having its floor below ground level (subgrade) on all sides.

- **Enclosure** – That portion of an elevated building below the lowest elevated floor that is either partially or fully shut in by rigid walls. A garage below or attached to an elevated building is considered an enclosure.

NOTE: A **finished** (habitable) area is an enclosed area that has more than 20 linear feet of finished interior walls (paneling, etc.).

An **unfinished** area is an enclosed area that is used only for the parking of vehicles, building access, or storage purposes and that does not meet the definition of a finished (habitable) area.

- **Crawlspace** – In an elevated building, an under-floor space that has its interior floor area (finished or not) no more than 5 feet below the top of the next higher floor.

XIII. COMPLETING PAGE 2 OF THE PREFERRED RISK POLICY AND NEWLY MAPPED APPLICATION FORM

The agent/producer must complete all relevant items in Page 2 of the PRP and Newly Mapped application form for all buildings.

A. Elevated Buildings (Including Manufactured [Mobile] Homes/Travel Trailers)

This section is required for all elevated buildings, including manufactured (mobile) homes/travel trailers.

1. Area Below the Lowest Elevated Floor

ELEVATED BUILDINGS	1. IF THE BUILDING IS ELEVATED, IS THE AREA BELOW
	<input type="checkbox"/> FREE OF OBSTRUCTION
	<input type="checkbox"/> WITH OBSTRUCTION

If the building is elevated, indicate whether the area below the lowest elevated floor is free of obstruction or with obstruction. An obstruction is a partially or fully enclosed area, or machinery and equipment, below the lowest elevated floor of the building.

2. Elevating Foundation Type

ELEVATED BUILDINGS	2. ELEVATING FOUNDATION TYPE
	<input type="checkbox"/> PIERS, POSTS, OR PILES
	<input type="checkbox"/> REINFORCED MASONRY PIERS OR CONCRETE PIERS OR COLUMNS
	<input type="checkbox"/> REINFORCED CONCRETE SHEAR WALLS
	<input type="checkbox"/> WOOD SHEAR WALLS
	<input type="checkbox"/> SOLID FOUNDATION WALLS

Check the elevating foundation type used for the building.

NOTE: "Solid (perimeter) foundation walls" means foundation walls as shown in Building Diagram numbers 7 and 8 on the Elevation Certificate.

3. Machinery and/or Equipment Below the Elevated Floor

ELEVATED BUILDINGS	3. MACHINERY AND/OR EQUIPMENT
	DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN MACHINERY AND/OR EQUIPMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IF YES, SELECT THE VALUE BELOW:
	<input type="checkbox"/> UP TO \$10,000
	<input type="checkbox"/> \$10,001 TO \$20,000
	<input type="checkbox"/> IF GREATER THAN \$20,000 - INDICATE THE AMOUNT: _____
	DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN A WASHER, DRYER OR FOOD FREEZER? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IF YES, SELECT THE VALUE BELOW:
	<input type="checkbox"/> UP TO \$5,000
	<input type="checkbox"/> \$5,001 TO \$10,000
<input type="checkbox"/> IF GREATER THAN \$10,000 - INDICATE THE AMOUNT: _____	

Check YES if the area below the elevated floor contains machinery and/or equipment and select the appropriate value. Otherwise, check NO.

Check YES if the area below the elevated floor contains a washer, dryer, or food freezer and select the appropriate value. Otherwise, check NO.

4. Area Below the Elevated Floor

ELEVATED BUILDINGS	4. AREA BELOW THE ELEVATED FLOOR
	IS THE AREA BELOW THE ELEVATED FLOOR ENCLOSED? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IF YES, CHECK ONE OF THE FOLLOWING:
	<input type="checkbox"/> FULLY <input type="checkbox"/> PARTIALLY
	IS THERE A GARAGE? (CHECK ONE)
	<input type="checkbox"/> NO GARAGE
	<input type="checkbox"/> BENEATH THE LIVING SPACE
	<input type="checkbox"/> NEXT TO THE LIVING SPACE
	DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN ELEVATORS?
	<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, HOW MANY? _____	

Check YES if the area below the elevated floor is enclosed; otherwise, check NO. If YES, indicate whether the area is fully or partially enclosed.

Select NO if there is no garage attached to the building.

Select Beneath the Living Space if the garage is under the lowest elevated floor and within the footprint of the building.

Select Next to Living Space if the garage is not under the lowest elevated floor and is attached to the building.

For additional guidance on elevated buildings with a garage, refer to Lowest Floor Guide (LFG) section of this manual.

Check YES if the area below the elevated floor contains elevators; otherwise, check NO. If YES, indicate the number of elevators.

ELEVATED BUILDINGS	IF THE ANSWER TO ANY OF THE QUESTIONS REGARDING THE AREA BELOW THE ELEVATED FLOOR IS YES, OR THERE IS A GARAGE, ANSWER ALL THE FOLLOWING.
	INDICATE MATERIAL USED FOR ENCLOSURE:
	<input type="checkbox"/> INSECT SCREENING
	<input type="checkbox"/> LIGHT WOOD LATTICE
	<input type="checkbox"/> SOLID WOOD FRAME WALLS (IF BREAKAWAY, SUBMIT CERTIFICATION DOCUMENTATION)
	<input type="checkbox"/> SOLID WOOD FRAME WALLS (NON-BREAKAWAY)
	<input type="checkbox"/> MASONRY WALLS (IF BREAKAWAY, SUBMIT CERTIFICATION DOCUMENTATION)
	<input type="checkbox"/> MASONRY WALLS (NON-BREAKAWAY)
	<input type="checkbox"/> OTHER (DESCRIBE): _____
	IF ENCLOSED WITH A MATERIAL OTHER THAN INSECT SCREENING OR LIGHT WOOD LATTICE, PROVIDE THE SIZE OF ENCLOSED AREA:
_____ SQUARE FEET	

Indicate the materials used for the enclosure.

If enclosed with a material other than insect screening or light wood lattice, provide the square footage of the enclosed area.

C. Construction Information

CONSTRUCTION INFORMATION	CHECK ONE OF THE FOLLOWING AND ENTER DATE FOR ORIGINAL CONSTRUCTION:
	<input type="checkbox"/> BUILDING PERMIT <input type="checkbox"/> CONSTRUCTION ____/____/____
	CHECK IF BUILDING HAS BEEN SUBSTANTIALLY IMPROVED AND ENTER DATE:
	<input type="checkbox"/> SUBSTANTIAL IMPROVEMENT ____/____/____
CHECK ONE OF THE FOLLOWING FOR MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS:	<input type="checkbox"/> LOCATED OUTSIDE A MOBILE HOME PARK OR SUBDIVISION: DATE OF PERMANENT PLACEMENT
	<input type="checkbox"/> LOCATED INSIDE A MOBILE HOME PARK OR SUBDIVISION: CONSTRUCTION DATE OF MOBILE HOME PARK OR SUBDIVISION FACILITIES

• Construction Date

Enter the building construction date (month/day/year). For Pre-FIRM buildings, enter the date the building was originally constructed, even if the building has subsequently been substantially improved. For Post-FIRM buildings, enter the date the building was originally constructed, unless the building has been substantially improved. For Post-FIRM buildings that have been substantially improved, enter the date the building was substantially improved.

Select the applicable box.

NOTE: For optional rating for Pre-FIRM buildings, refer to the Rating section of this manual.

• Building Permit

Select this box if construction began within 180 days of the building permit date and enter the building permit date.

• Construction

Select this box if construction began more than 180 days after the building permit date and enter the date of the start of construction.

• Substantial Improvement

Select this box if the building has been substantially improved. Substantial improvement is any reconstruction, rehabilitation, addition, or other improvement of a building, the cost of which equals or exceeds 50% of the market value of the building before the start of construction of the improvement.

• Manufactured (Mobile) Homes/Travel Trailers Located Outside a Mobile Home Park or Subdivision

Select this box if the manufactured (mobile) home or travel trailer is located outside a mobile home park or subdivision, and enter the date of permanent placement.

• Manufactured (Mobile) Homes/Travel Trailers Located Inside a Mobile Home Park or Subdivision

Select this box if the manufactured (mobile) home or travel trailer is located inside a mobile home park or subdivision, and enter the construction date of the mobile home park or subdivision facilities.

D. Contents

CONTENTS	CONTENTS LOCATED IN:*
	<input type="checkbox"/> BASEMENT/ENCLOSURE <input type="checkbox"/> BASEMENT/ENCLOSURE AND ABOVE
	<input type="checkbox"/> LOWEST FLOOR ONLY ABOVE GROUND LEVEL
	<input type="checkbox"/> LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER
	<input type="checkbox"/> ABOVE GROUND LEVEL MORE THAN 1 FULL FLOOR
	IS PERSONAL PROPERTY HOUSEHOLD CONTENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF NO, DESCRIBE: _____	
*IF SINGLE FAMILY, CONTENTS ARE RATED THROUGHOUT THE BUILDING.	

Check the box that describes the location of the contents to be insured. Check YES if personal property is household contents; otherwise, check NO and describe.

E. Building Eligibility

BUILDING ELIGIBILITY	THE PREFERRED RISK POLICY (PRP) IS ONLY AVAILABLE IF ALL ANSWERS TO QUESTIONS A AND B ARE NO, EXCEPT FOR BUILDINGS ELIGIBLE UNDER THE NEWLY MAPPED PROCEDURE, FOR WHICH THE ANSWER TO QUESTION A MAY BE YES.
	ANSWER THE FOLLOWING TO DETERMINE A BUILDING'S ELIGIBILITY FOR A PRP:
	A) IS THE BUILDING LOCATED IN A SPECIAL FLOOD HAZARD AREA (SFHA)? <input type="checkbox"/> YES <input type="checkbox"/> NO

Check YES if the building is located in an SFHA; otherwise, check NO.

NOTE: If the answer to question A is YES, this risk is not eligible for the PRP, but may be eligible under the Newly Mapped procedure.

BUILDING ELIGIBILITY	B) DO ANY OF THE FOLLOWING CONDITIONS, ARISING FROM 1 OR MORE OCCURRENCES IN ANY 10-YEAR PERIOD, EXIST?
	= 2 LOSS PAYMENTS, EACH MORE THAN \$1,000 <input type="checkbox"/> YES <input type="checkbox"/> NO
	= 3 OR MORE LOSS PAYMENTS, REGARDLESS OF AMOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO
	= 2 FEDERAL DISASTER RELIEF PAYMENTS, EACH MORE THAN \$1,000 <input type="checkbox"/> YES <input type="checkbox"/> NO
	= 3 FEDERAL DISASTER RELIEF PAYMENTS, REGARDLESS OF AMOUNT <input type="checkbox"/> YES <input type="checkbox"/> NO
= 1 FLOOD INSURANCE CLAIM PAYMENT AND 1 FLOOD DISASTER RELIEF PAYMENT (INCLUDING LOANS AND GRANTS), EACH MORE THAN \$1,000 <input type="checkbox"/> YES <input type="checkbox"/> NO	

Check the appropriate boxes to determine the building's eligibility for a PRP.

NOTE: If the answer is YES to any of the questions in B, this risk is not eligible for the PRP.

THIS LAYOUT OF THE REVISED FLOOD INSURANCE APPLICATION, PAGE 1 OF 2, IS PROVIDED FOR YOUR REFERENCE. THE FINAL FORM WILL BE RELEASED UPON O.M.B. APPROVAL.

U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program
PREFERRED RISK POLICY AND NEWLY MAPPED APPLICATION, PAGE 1 (OF 2)
IMPORTANT—PLEASE PRINT OR TYPE; ENTER DATES AS MM/DD/YYYY.

NEW RENEWAL
 TRANSFER (NFIP ONLY)

PRIOR POLICY #: _____

BILLING	FOR RENEWAL, BILL: <input type="checkbox"/> INSURED <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> FIRST MORTGAGEE <input type="checkbox"/> OTHER (AS SPECIFIED IN THE "2ND MORTGAGEE/OTHER" BOX BELOW) <input type="checkbox"/> SECOND MORTGAGEE	POLICY PERIOD	POLICY PERIOD IS FROM ____/____/____ TO ____/____/____ 12:01 A.M. LOCAL TIME AT THE INSURED PROPERTY LOCATION. WAITING PERIOD: <input type="checkbox"/> STANDARD 30-DAY <input type="checkbox"/> REQUIRED FOR LOAN TRANSACTION - NO WAITING PERIOD <input type="checkbox"/> MAP REVISION (ZONE CHANGE FROM NON-SFHA TO SFHA) - 1 DAY <input type="checkbox"/> TRANSFER (NFIP ONLY) - NO WAITING PERIOD
	NAME AND MAILING ADDRESS OF AGENT/PRODUCER: AGENCY NO.: _____ AGENT'S TAX ID: _____ PHONE NO.: _____ FAX NO.: _____ EMAIL ADDRESS: _____		INDICATE THE PROPERTY PURCHASE DATE: ____/____/____ NAME AND MAILING ADDRESS OF INSURED: PHONE NO.: _____
AGENT/PRODUCER INFORMATION	NOTE: ONE BUILDING PER POLICY - BLANKET COVERAGE NOT PERMITTED. IS INSURED PROPERTY LOCATION SAME AS INSURED'S MAILING ADDRESS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ENTER PROPERTY ADDRESS, IF RURAL, ENTER LEGAL DESCRIPTION, OR GEOGRAPHIC LOCATION OF PROPERTY (DO NOT USE P.O. BOX). IDENTIFY ADDRESS TYPE: <input type="checkbox"/> STREET <input type="checkbox"/> LEGAL DESCRIPTION* <input type="checkbox"/> GEOGRAPHIC LOCATION	INSURED INFORMATION	IS THE INSURED A SMALL BUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO IS THE INSURED A NON-PROFIT ENTITY? <input type="checkbox"/> YES <input type="checkbox"/> NO NAME AND MAILING ADDRESS OF FIRST MORTGAGEE: LOAN NO.: _____ IS INSURANCE REQUIRED UNDER MANDATORY PURCHASE? <input type="checkbox"/> YES <input type="checkbox"/> NO
	FOR AN ADDRESS WITH MULTIPLE BUILDINGS AND/OR FOR A BUILDING WITH ADDITIONS OR EXTENSIONS, DESCRIBE THE INSURED BUILDING: *LEGAL DESCRIPTION MAY BE USED ONLY WHILE A BUILDING OR SUBDIVISION IS IN THE COURSE OF CONSTRUCTION OR PRIOR TO ESTABLISHING A STREET ADDRESS.		NAME AND MAILING ADDRESS OF: <input type="checkbox"/> 2ND MORTGAGEE <input type="checkbox"/> LOSS PAYEE <input type="checkbox"/> OTHER IF OTHER, SPECIFY: _____ LOAN NO.: _____ IS INSURANCE REQUIRED UNDER MANDATORY PURCHASE? <input type="checkbox"/> YES <input type="checkbox"/> NO
PROPERTY LOCATION	RATING MAP INFORMATION NAME OF COUNTY/PARISH: _____ COMMUNITY NO./PANEL NO. AND SUFFIX: _____ FIRM ZONE: _____ MAP DATE: ____/____/____ CURRENT MAP INFORMATION CURRENT COMMUNITY NO./PANEL NO. AND SUFFIX: _____ CURRENT FIRM ZONE: _____ CURRENT BFE: _____ MAP DATE: ____/____/____	1ST MORTGAGEE	IS INSURANCE REQUIRED FOR DISASTER ASSISTANCE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, CHECK THE GOVERNMENT AGENCY: <input type="checkbox"/> SBA <input type="checkbox"/> FEMA <input type="checkbox"/> FHA <input type="checkbox"/> OTHER (SPECIFY): _____ CASE FILE NO.: _____
	NEWLY MAPPED INFORMATION DATE THE BUILDING WAS NEWLY MAPPED INTO THE SFHA: ____/____/____		DISASTER ASSISTANCE
COMMUNITY	1. BUILDING PURPOSE <input type="checkbox"/> 100% RESIDENTIAL <input type="checkbox"/> 100% NON-RESIDENTIAL <input type="checkbox"/> MIXED-USE - SPECIFY PERCENTAGE OF RESIDENTIAL USE: _____ %	2ND MORTGAGEE/OTHER	10. IS BUILDING ELEVATED? <input type="checkbox"/> YES <input type="checkbox"/> NO
	2. BUILDING OCCUPANCY <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> 2-4 FAMILY <input type="checkbox"/> OTHER RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL BUSINESS <input type="checkbox"/> OTHER NON-RESIDENTIAL		11. BASEMENT, ENCLOSURE, CRAWLSPACE <input type="checkbox"/> NONE <input type="checkbox"/> FINISHED BASEMENT/ENCLOSURE <input type="checkbox"/> CRAWLSPACE <input type="checkbox"/> UNFINISHED BASEMENT/ENCLOSURE <input type="checkbox"/> SUBGRADE CRAWLSPACE
ALL BUILDINGS	3. IS THE BUILDING A HOUSE OF WORSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO	DISASTER ASSISTANCE	12. NUMBER OF FLOORS IN BUILDING (INCLUDING BASEMENT/ENCLOSED AREA, IF ANY) OR BUILDING TYPE <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 OR MORE <input type="checkbox"/> SPLIT LEVEL <input type="checkbox"/> TOWNHOUSE/ROWHOUSE (RCBAP LOW-RISE ONLY) <input type="checkbox"/> MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER ON FOUNDATION
	4. IS THE BUILDING AN AGRICULTURAL STRUCTURE? <input type="checkbox"/> YES <input type="checkbox"/> NO		9. BUILDING INFORMATION IS BUILDING IN THE COURSE OF CONSTRUCTION? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING WALLED AND ROOFED? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING OVER WATER? <input type="checkbox"/> NO <input type="checkbox"/> PARTIALLY <input type="checkbox"/> ENTIRELY
NON-ELEVATED BUILDINGS	5. BUILDING DESCRIPTION (CHECK ONE) <input type="checkbox"/> MAIN HOUSE <input type="checkbox"/> DETACHED GUEST HOUSE <input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> BARN <input type="checkbox"/> APARTMENT BUILDING <input type="checkbox"/> APARTMENT - UNIT <input type="checkbox"/> COOPERATIVE BUILDING <input type="checkbox"/> COOPERATIVE - UNIT <input type="checkbox"/> WAREHOUSE <input type="checkbox"/> TOOL/STORAGE SHED	DISASTER ASSISTANCE	2. BASEMENT/SUBGRADE CRAWLSPACE DOES THE BASEMENT/SUBGRADE CRAWLSPACE CONTAIN MACHINERY AND/OR EQUIPMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SELECT THE VALUE BELOW: <input type="checkbox"/> UP TO \$10,000 <input type="checkbox"/> \$10,001 TO \$20,000 <input type="checkbox"/> IF GREATER THAN \$20,000 - INDICATE THE AMOUNT: _____
	6. CONDOMINIUM INFORMATION IS BUILDING IN A CONDOMINIUM FORM OF OWNERSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO IS COVERAGE FOR THE ENTIRE BUILDING? <input type="checkbox"/> YES <input type="checkbox"/> NO TOTAL NUMBER OF UNITS: _____ <input type="checkbox"/> HIGH-RISE <input type="checkbox"/> LOW-RISE IS COVERAGE FOR A CONDOMINIUM UNIT? <input type="checkbox"/> YES <input type="checkbox"/> NO		DOES THE BASEMENT/SUBGRADE CRAWLSPACE CONTAIN A WASHER, DRYER OR FOOD FREEZER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SELECT THE VALUE BELOW: <input type="checkbox"/> UP TO \$5,000 <input type="checkbox"/> \$5,001 TO \$10,000 <input type="checkbox"/> IF GREATER THAN \$10,000 - INDICATE THE AMOUNT: _____
NON-ELEVATED BUILDINGS	7. ADDITIONS AND EXTENSIONS (IF APPLICABLE) DOES THE BUILDING HAVE ANY ADDITIONS OR EXTENSIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO (ADDITIONS AND EXTENSIONS MAY BE SEPARATELY INSURED.) COVERAGE IS FOR: <input type="checkbox"/> BUILDING INCLUDING ADDITION(S) AND EXTENSION(S) <input type="checkbox"/> BUILDING EXCLUDING ADDITION(S) AND EXTENSION(S) PROVIDE POLICY NUMBER FOR ADDITION OR EXTENSION: _____	DISASTER ASSISTANCE	3. GARAGE IS A GARAGE ATTACHED TO THE BUILDING? <input type="checkbox"/> YES <input type="checkbox"/> NO TOTAL NET AREA OF THE GARAGE: [] SQUARE FEET ARE THERE ANY OPENINGS (EXCLUDING DOORS) THAT ARE DESIGNED TO ALLOW THE PASSAGE OF FLOODWATERS THROUGH THE GARAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO
	8. PRIMARY RESIDENCE, RENTAL PROPERTY, TENANT'S COVERAGE IS BUILDING INSURED'S PRIMARY RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO IS BUILDING A RENTAL PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO IS THE INSURED A TENANT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, IS THE TENANT REQUESTING BUILDING COVERAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SEE NOTICE IN SIGNATURE BLOCK ON PAGE 2.		DOES THE BASEMENT/SUBGRADE CRAWLSPACE CONTAIN MACHINERY AND/OR EQUIPMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SELECT THE VALUE BELOW: <input type="checkbox"/> UP TO \$10,000 <input type="checkbox"/> \$10,001 TO \$20,000 <input type="checkbox"/> IF GREATER THAN \$20,000 - INDICATE THE AMOUNT: _____

NFIP COPY

PLEASE SUBMIT TOTAL AMOUNT DUE AND ALL REQUIRED CERTIFICATIONS WITH THE NFIP COPY OF THIS APPLICATION. IF PAYING BY CHECK OR MONEY ORDER, MAKE PAYABLE TO THE NATIONAL FLOOD INSURANCE PROGRAM. IMPORTANT - COMPLETE PAGE 1 AND PAGE 2 BEFORE SENDING APPLICATION TO THE NFIP. - IMPORTANT

PREFERRED RISK POLICY AND NEWLY MAPPED APPLICATION

FEMA FORM 086-0-5

NONDISCRIMINATION

No person or organization shall be excluded from participation in, denied the benefits of, or subjected to discrimination under the Program authorized by the Act, on the grounds of race, color, creed, sex, age or national origin.

PRIVACY ACT

The information requested is necessary to process your Flood Insurance Application for a flood insurance policy. The authority to collect the information is Title 42, U.S. Code, Sections 4001 to 4028. Disclosures of this information may be made: to federal, state, tribal, and local government agencies, fiscal agents, your agent, mortgage servicing companies, insurance or other companies, lending institutions, and contractors working for us, for the purpose of carrying out the National Flood Insurance Program; to current Severe Repetitive Loss property owners and Preferred Risk Policy owners for the purpose of property loss history evaluation; to the American Red Cross for verification of nonduplication of benefits following a flooding event or disaster; to law enforcement agencies or professional organizations when there may be a violation or potential violation of law; to a federal, state or local agency when we request information relevant to an agency decision concerning issuance of a grant or other benefit, or in certain circumstances when a federal agency requests such information for a similar purpose from us; to a Congressional office in response to an inquiry made at the request of an individual; to the Office of Management and Budget (OMB) in relation to private relief legislation under OMB Circular A-19; and to the National Archives and Records Administration in records management inspections. Providing the information is voluntary, but failure to do so may delay or prevent issuance of the flood insurance policy.

GENERAL

This information is provided pursuant to Public Law 96-511 (Paperwork Reduction Act of 1980, as amended), dated December 11, 1980, to allow the public to participate more fully and meaningfully in the Federal paperwork review process.

AUTHORITY

Public Law 96-511, amended, 44 U.S.C. 3507; and 5 CFR 1320.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 10 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington VA 20598-3005, Paperwork Reduction Project (1660-0033).

NOTE: Do not send your completed form to this address.

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Flagler Beach (City)	FL	120087	Y	Y
Flagler County (Uninc. Areas)	FL	120085	Y	Y
Fort Lauderdale (City)	FL	125105	N	Y
Fort Myers Beach (Town)	FL	120673	Y	N
Fort Pierce (City)	FL	120286	Y	Y
Franklin County (Uninc. Areas)	FL	120088	Y	Y
Gulf Breeze (City)	FL	120275	Y	Y
Gulf County (Uninc. Areas)	FL	120098	Y	Y
Hillsborough County (Uninc. Areas)	FL	120112	Y	Y
Hollywood (City)	FL	125113	Y	Y
Indian River County (Uninc. Areas)	FL	120119	Y	Y
Islamorada (Village)	FL	120424	Y	Y
Islandia (City)	FL	120647	Y	Y
Jacksonville (City)	FL	120077	Y	Y
Jupiter (Town)	FL	125119	N	Y
Jupiter Island (Town)	FL	120162	Y	Y
Key Biscayne (Village)	FL	120648	N	Y
Layton (City)	FL	120169	N	Y
Lee County (Uninc. Areas)	FL	125124	Y	Y
Levy County (Uninc. Areas)	FL	120145	Y	Y
Longboat Key (Town)	FL	125126	Y	Y
Malabar (Town)	FL	120024	Y	N
Manatee County (Uninc. Areas)	FL	120153	Y	Y
Marathon (City)	FL	120681	Y	N
Marco Island (City)	FL	120426	Y	Y
Marineland (Town)	FL	120570	Y	N
Martin County (Uninc. Areas)	FL	120161	Y	Y
Melbourne Beach (Town)	FL	125128	N	Y
Mexico Beach (City)	FL	120010	Y	N
Miami (City)	FL	120650	N	Y
Miami-Dade (Uninc. Areas)	FL	120635	Y	Y
Monroe County (Uninc. Areas)	FL	125129	Y	Y
Naples (City)	FL	125130	Y	Y
Nassau County (Uninc. Areas)	FL	120170	N	Y
New Smyrna Beach (City)	FL	125132	Y	N
North Palm Beach (Village)	FL	120217	N	Y
Oak Hill (City)	FL	120624	N	Y
Okaloosa County (Uninc. Areas)	FL	120173	Y	N
Orchid (Town)	FL	120122	N	Y
Palm Beach County (Uninc. Areas)	FL	120192	N	Y
Palmetto Bay (Village)	FL	120687	N	Y
Pasco County (Uninc. Areas)	FL	120230	N	Y
Pensacola Beach-Santa Rosa Island Authority	FL	125138	Y	Y
Pinellas County (Uninc. Areas)	FL	125139	Y	Y
Ponce Inlet (Town)	FL	120312	Y	N
Port St. Joe (City)	FL	120099	Y	N
Port St. Lucie (City)	FL	120287	Y	N
Riviera Beach (City)	FL	125142	N	Y
Sanibel (City)	FL	120402	Y	Y
Santa Rosa County (Uninc. Areas)	FL	120274	Y	Y

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Gosnold (Town)	MA	250071	Y	Y
Hull (Town)	MA	250269	Y	N
Ipswich (Town)	MA	250086	Y	Y
Kingston (Town)	MA	250270	Y	N
Manchester (Town)	MA	250090	Y	N
Marion (Town)	MA	255213	Y	N
Marshfield (Town)	MA	250273	Y	N
Mashpee (Town)	MA	250009	Y	Y
Mattapoisett (Town)	MA	255214	Y	N
Nantucket (Town)	MA	250230	Y	N
Newbury (Town)	MA	250096	N	Y
Oak Bluffs (Town)	MA	250072	Y	Y
Orleans (Town)	MA	250010	Y	Y
Plymouth (Town)	MA	250278	Y	N
Provincetown (Town)	MA	255218	N	Y
Quincy (City)	MA	255219	N	Y
Rockport (Town)	MA	250100	Y	N
Rowley (Town)	MA	250101	N	Y
Salisbury (Town)	MA	250103	N	Y
Sandwich (Town)	MA	250012	Y	Y
Scituate (Town)	MA	250282	Y	N
Swampscott (Town)	MA	250105	Y	N
Swansea (Town)	MA	255221	Y	N
Tisbury (Town)	MA	250073	Y	N
Truro (Town)	MA	255222	Y	Y
Wareham (Town)	MA	255223	Y	N
Wellfleet (Town)	MA	250014	N	Y
West Tisbury (Town)	MA	250074	Y	N
Westport (Town)	MA	255224	Y	Y
Winthrop (Town)	MA	250289	N	Y
Yarmouth (Town)	MA	250015	Y	Y
Calvert County (Uninc. Areas)	MD	240011	Y	Y
Crisfield (City)	MD	240062	N	Y
Dorchester County (Uninc. Areas)	MD	240026	Y	Y
Kent County (Uninc. Areas)	MD	240045	Y	Y
Oxford (Town)	MD	240068	Y	N
Queen Annes County (Uninc. Areas)	MD	240054	Y	N
Somerset County (Uninc. Areas)	MD	240061	Y	Y
St. Mary's County (Uninc. Areas)	MD	240064	Y	Y
Talbot County (Uninc. Areas)	MD	240066	Y	N
Wicomico County (Uninc. Areas)	MD	240078	Y	N
Worcester County (Uninc. Areas)	MD	240083	N	Y
Andrews Island	ME	230967	Y	N
Cape Elizabeth (Town)	ME	230043	Y	Y
Cranberry Isles (Town)	ME	230278	Y	N
Cumberland (Town)	ME	230162	Y	N
Cutler (Town)	ME	230310	Y	Y
Georgetown (Town)	ME	230209	N	Y
Harpwell (Town)	ME	230169	Y	N
Harrington (Town)	ME	230314	Y	N

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Gautier (City)	MS	280332	Y	N
Hancock County (Uninc. Areas)	MS	285254	Y	N
Harrison County (Uninc. Areas)	MS	285255	Y	Y
Jackson County (Uninc. Areas)	MS	285256	Y	Y
Ocean Springs (City)	MS	285259	Y	N
Atlantic Beach (Town)	NC	370044	N	Y
Bald Head Island (Village)	NC	370442	N	Y
Brunswick County (Uninc. Areas)	NC	370295	Y	Y
Carolina Beach (Town)	NC	375347	Y	Y
Carteret County (Uninc. Areas)	NC	370043	N	Y
Currituck County (Uninc. Areas)	NC	370078	Y	Y
Dare County (Uninc. Areas)	NC	375348	Y	Y
Duck (Town)	NC	370632	Y	N
Hyde County (Uninc. Areas)	NC	370133	N	Y
Kill Devil Hills (City)	NC	375353	Y	N
Kure Beach (Town)	NC	370170	N	Y
Nags Head (Town)	NC	375356	Y	Y
New Hanover County (Uninc. Areas)	NC	370168	Y	Y
North Topsall Beach (Town)	NC	370466	Y	N
Onslow County (Uninc. Areas)	NC	370340	Y	Y
Pender County (Uninc. Areas)	NC	370344	Y	N
Pine Knoll Shores (Town)	NC	370267	N	Y
Sunset Beach (Town)	NC	375359	Y	N
Swansboro (City)	NC	370179	N	Y
Wilmington (City)	NC	370171	Y	N
Wrightsville Beach (Town)	NC	375361	Y	N
Aberdeen (Township)	NJ	340312	N	Y
Barneгат Light (Borough)	NJ	345280	N	Y
Bass River (Township)	NJ	340085	N	Y
Beach Haven (Borough)	NJ	345282	N	Y
Berkeley (Township)	NJ	340369	N	Y
Brick (Township)	NJ	345285	Y	Y
Brigantine (City)	NJ	345286	N	Y
Cape May City (City)	NJ	345288	N	Y
Dennis (Township)	NJ	340552	Y	Y
Galloway (Township)	NJ	340008	N	Y
Highlands (Borough)	NJ	345297	N	Y
Keyport (Borough)	NJ	340304	Y	N
Lacey (Township)	NJ	340376	N	Y
Little Egg Harbor (Township)	NJ	340380	N	Y
Long Beach (Township)	NJ	345301	N	Y
Lower (Township)	NJ	340153	N	Y
Mantoloking (Borough)	NJ	340383	Y	N
Maurice River (Township)	NJ	340172	Y	Y
Middle (Township)	NJ	340154	Y	Y
Middletown (Township)	NJ	340313	Y	Y
Monmouth Beach (Borough)	NJ	340315	Y	N
North Wildwood (City)	NJ	345308	Y	N
Ocean (Township)	NJ	340518	N	Y
Ocean City (City)	NJ	345310	N	Y

**COASTAL BARRIER RESOURCES SYSTEM
LIST OF COMMUNITIES (continued)**

COMMUNITY NAME	STATE	COMMUNITY NUMBER	COASTAL BARRIER AREA(S)	OTHERWISE PROTECTED AREA(S)
Scriba (Town)	NY	360663	Y	N
Shelter Island (Town)	NY	360809	Y	N
Smithtown (Town)	NY	360810	Y	N
Sodus (Town)	NY	360898	Y	N
Southampton (Town)	NY	365342	Y	Y
Southampton (Village)	NY	365343	Y	N
Southold (Town)	NY	360813	Y	Y
Sterling (Town)	NY	360126	Y	N
Wolcott (Town)	NY	360901	Y	N
Erie County (Uninc. Areas)	OH	390153	Y	N
Grand River (Village)	OH	390315	Y	N
Kelleys Island (Village)	OH	390738	Y	N
Lake County (Uninc. Areas)	OH	390771	Y	N
Mentor (City)	OH	390317	Y	N
Ottawa County (Uninc. Areas)	OH	390432	Y	N
Sandusky (City)	OH	390156	Y	N
Ponce (Municipio)	PR	720101	Y	Y
Puerto Rico (Uninc. Areas)	PR	720000	Y	Y
Barrington (Town)	RI	445392	Y	N
Bristol (Town)	RI	445393	Y	N
Charlestown (Town)	RI	445395	Y	Y
Jamestown (Town)	RI	445399	Y	Y
Little Compton (Town)	RI	440035	Y	Y
Middletown (Town)	RI	445401	N	Y
Narragansett (Town)	RI	445402	Y	Y
New Shoreham (Town)	RI	440036	Y	Y
Newport (City)	RI	445403	Y	Y
North Kingstown (Town)	RI	445404	Y	N
Portsmouth (Town)	RI	445405	Y	Y
South Kingstown (Town)	RI	445407	Y	Y
Tiverton (Town)	RI	440012	Y	N
Warren (Town)	RI	445408	Y	N
Warwick (City)	RI	445409	Y	Y
Westerly (Town)	RI	445410	Y	Y
Awendaw (Town)	SC	450262	N	Y
Beaufort County (Uninc. Areas)	SC	450025	Y	Y
Briarcliffe Acres (Town)	SC	450232	Y	N
Charleston (City)	SC	455412	Y	N
Charleston County (Uninc. Areas)	SC	455413	Y	Y
Colleton County (Uninc. Areas)	SC	450056	Y	Y
Edisto Beach (Town)	SC	455414	N	Y
Folly Beach (City)	SC	455415	Y	Y
Georgetown County (Uninc. Areas)	SC	450085	Y	Y
Horry County (Uninc. Areas)	SC	450104	Y	N
Jasper County (Uninc. Areas)	SC	450112	N	Y
Kiawah Island (Town)	SC	450257	Y	N
McClellanville (Town)	SC	450039	N	Y
Mount Pleasant (Town)	SC	455417	Y	N
North Myrtle Beach (Town)	SC	450110	Y	N
Pawleys Island (Town)	SC	450255	Y	N

3. Zone AE
Used in place of A1–A30 on some maps.
4. Zone AH
Shallow water depths (ponding) and/or unpredictable flow paths between 1 and 3 feet occur. BFEs are provided.
5. Zone AO
Shallow water paths (sheet flow) and/or unpredictable flow paths between 1 and 3 feet occur. BFEs are not provided. Base flood depths may be provided.
6. Zone A99
Enough progress has been made on a protective system such as dikes, dams, and levees to consider it complete for insurance rating purposes. BFEs are not provided. For the purpose of determining Community Rating System (CRS) premium discounts, all AR and A99 Zones are treated as non-SFHAs.
7. Zone AR
Area that results from the decertification of a previously accredited flood protection system that is determined to be in the process of being restored to provide base flood protection. For the purpose of determining CRS premium discounts, all AR and A99 Zones are treated as non-SFHAs.
8. Zones AR/AE, AR/AH, AR/AO, AR/A1–A30, AR/A
Dual flood zones that, because of flooding from other water sources that the flood protection system does not contain, will continue to be subject to flooding after the flood protection system is adequately restored. For the purpose of determining CRS premium discounts, all AR and A99 Zones are treated as non-SFHAs.
9. Zone V
An area that is inundated by tidal floods with velocity (coastal high hazard area). BFEs are not provided.
10. Zones V1–V30
Identical to V Zone, but BFEs are provided.
11. Zone VE
Used in place of V1–V30 on some maps.

B. Moderate, Minimal Hazard Areas

1. Zones B, C, and X
Areas of moderate or minimal hazard subject to flooding from severe storm activity or local

drainage problems. These zones may be lightly shaded or unshaded on the FIRM. Zone X is the designation for B and C Zones and is used in place of these zones on some maps.

2. Zone D

An area where the flood hazard is undetermined and which usually is very sparsely populated. The designation of Zone D can also be used for rating when a community incorporates portions of another community's area where no map has been prepared. In addition, if the map shows an area as being unmapped, use Zone D.

III. LOCATING A SPECIFIC PROPERTY ON A MAP

- Check the map index to identify the correct map panel.
- Directly locate the property by the address or other information. It may help to compare the FHBM or FIRM to a more detailed map, such as an assessor's map or a community street map.
- Note the map color where the property is located. On FHBM and FIRMs, areas darkly shaded are the SFHAs. On an FHBM, no other zone data may be given. On a FIRM, zones are also given an alpha designation. The entire area within the boundaries indicated for a zone carries that specific zone designation.
- BFEs in SFHA zones (A1–A30 [or AE], AH, V1–V30 [or VE]) are shown within wavy lines. In some SFHA zones, where the BFE does not vary within the entire zone, the BFE is indicated in parentheses. If required by terrain, a BFE for the property may be interpolated using the closest BFE indicators. In this case, it is important to document the finding.

IV. CHANGING OR CORRECTING A FLOOD MAP

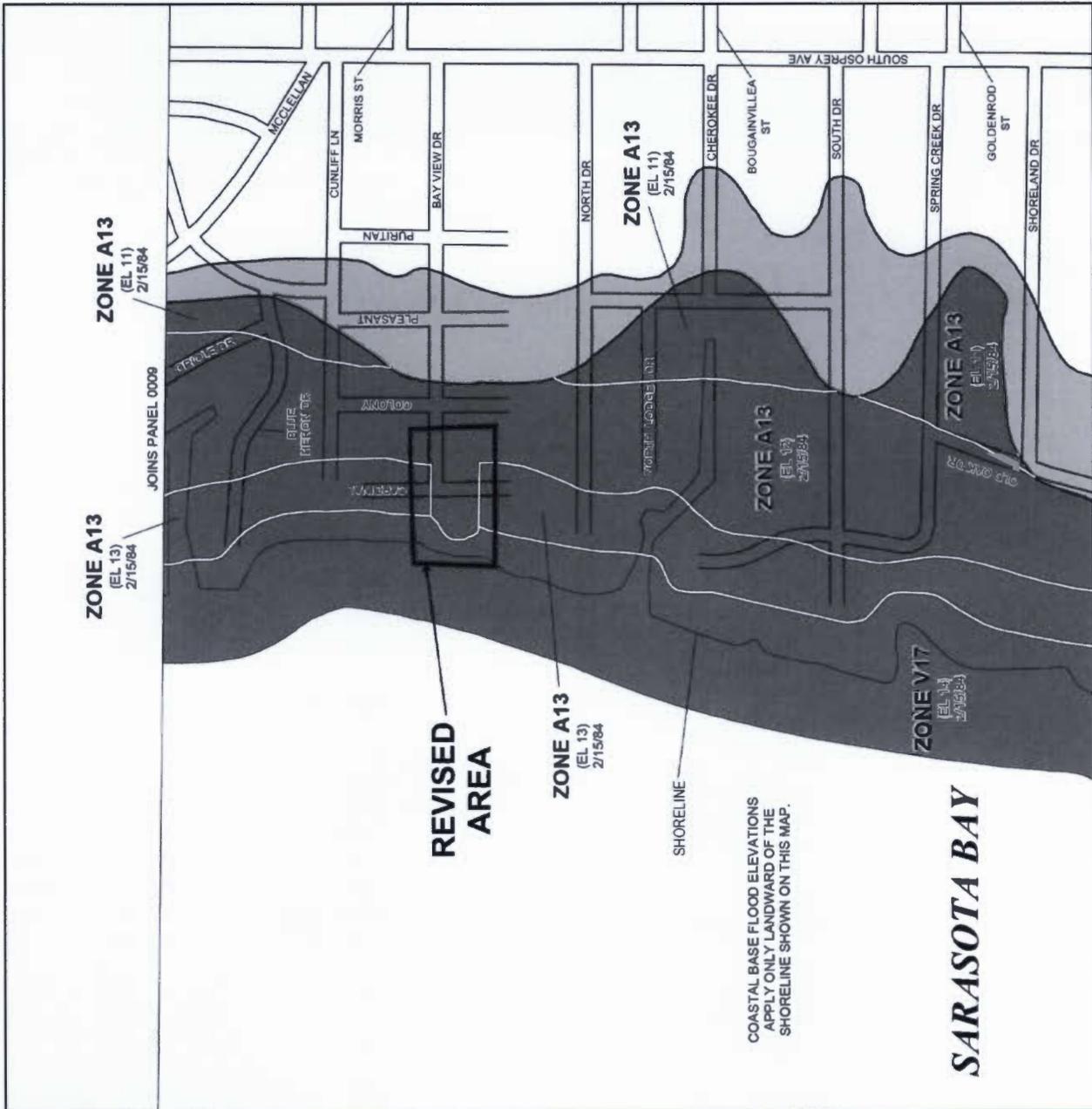
There are 3 procedures:

A. Letter of Map Amendment (LOMA)

If the applicant/insured believes that the requirement to purchase flood insurance was made in error and there is evidence that the building is not in the SFHA on the effective FIRM, the applicant/insured may apply for a LOMA.

A LOMA is a determination made by FEMA for property and/or building as to whether it is located within the SFHA. LOMA determinations are based on the following:

- Comparing the location of the property to the SFHA.
- Comparing the elevation of the property to the 1-percent-annual-chance flood elevation.



Legend

- 1% annual chance (100-Year) Floodplain
- 1% annual chance (100-Year) Floodway
- 0.2% annual chance (500-Year) Floodplain

APPROXIMATE SCALE IN FEET

500 250 0 250 500

NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

CITY OF
SARASOTA,
FLORIDA
SARASOTA COUNTY

PANEL 13 OF 14
(SEE MAP INDEX FOR PANELS NOT PRINTED)

REVISED TO
REFLECT LOMR
EFFECTIVE: October 22, 2014

MAP NUMBER
125150 0013 B

MAP REVISED:
FEBRUARY 15, 1984



Federal Emergency Management Agency

In determining a building's flood loss history for the Newly Mapped procedure, Federal flood disaster relief payments (including loans and grants) are considered only if the building sustained flood damage. A Newly Mapped property that becomes ineligible due to loss history must be renewed as a standard-rated policy. Renewal of a policy under the Newly Mapped procedure that does not qualify because of loss history is considered a misrating.

III. INELIGIBILITY

For help in determining eligibility/ineligibility of various condominium risks, use the Condominium Rating Chart (Table 2) in this section.

- Buildings and/or contents in Emergency Program communities are not eligible for the Newly Mapped procedure.
- Multi-unit residential condominium buildings eligible under the Residential Condominium Building Association Policy (RCBAP) are not eligible for the Newly Mapped procedure.
- Buildings on Leased Federal Property determined by the Administrator to be located on the river-facing side of any dike, levee, or other riverine flood-control structure, or seaward of any seawall or other coastal flood-control structure are not eligible.

IV. DOCUMENTATION

A Preferred Risk Policy (PRP) and Newly Mapped Application form must be used when applying for coverage under the Newly Mapped procedure. To determine eligibility, both the previous and current zones must each be documented with 1 or more of the items from the list below.

- A Letter of Map Amendment (LOMA);
- A Letter of Map Revision (LOMR);
- A Letter of Determination Review (LODR);
- A letter indicating the property address and flood zone of the building, and signed and dated by a local community official;
- An Elevation Certificate indicating the exact location and flood zone of the building, signed and dated by a surveyor, an engineer, an architect, or a local community official;
- A flood zone determination certification that guarantees the accuracy of the information; or
- A copy of the most recent flood map marked to show the exact location and flood zone of the building is also acceptable, though additional

documentation may be required if the building is close to the zone boundary.

An agent/producer writing through a Write Your Own (WYO) Company should contact that company for guidance.

V. RENEWAL

An eligible risk renews automatically without submission of a new application. If, during a policy term, the risk fails to meet the eligibility requirements due to loss history, it cannot be renewed under the Newly Mapped procedure. It must be non-renewed or rewritten as a standard-rated policy.

After the initial policy year, a policy issued under the Newly Mapped procedure will begin the transition to full-risk rates. An insured may obtain an Elevation Certificate to determine whether full-risk rates are more favorable. The full-risk rates may be based on the current map or a grandfathered zone and/or Base Flood Elevation (BFE). For additional guidance, refer to the Rating section of this manual.

VI. COVERAGE LIMITATIONS

- Basement coverage limitations apply to a policy issued under the Newly Mapped procedure.
- Individual condominium units in nonresidential condominium buildings are not eligible for building coverage.
- Condominium units insured under the Dwelling or General Property form are not eligible for Increased Cost of Compliance (ICC) coverage.

NOTE: Elevated building coverage limitations do not apply to a policy issued under the Newly Mapped procedure

VII. DISCOUNTS/FEES/ICC PREMIUM

- Community Rating System (CRS) discounts are not available for Newly Mapped properties.
- The \$50 Community Probation Surcharge is added, when applicable.
- Add either a \$25.00 or a \$250.00 surcharge to the premium in accordance with the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA). The HFIAA surcharge is \$25.00 for policies covering primary residences, including contents-only policies, if the named insured's primary residence is a single-family dwelling, an individual condominium unit, an apartment unit, or a unit in a cooperative building. For all other policies, the HFIAA surcharge

TABLE 2. PROPERTIES NEWLY MAPPED INTO AN SFHA CONDOMINIUM RATING CHART

**RESIDENTIAL SINGLE-UNIT BUILDING OR
TOWNHOUSE-/ROWHOUSE-TYPE BUILDING WITH SEPARATE ENTRANCE FOR EACH UNIT**

PURCHASER OF POLICY	BUILDING OCCUPANCY¹	CONDO UNIT INDICATOR¹	NEWLY MAPPED	RATE TABLE	POLICY FORM
UNIT OWNER	Single family	Yes	Yes	1-4 Family residential	Dwelling
ASSOCIATION (ASSOCIATION-OWNED SINGLE UNIT ONLY)	Single family	Yes	Yes	1-4 Family residential	Dwelling
ASSOCIATION (ENTIRE BUILDING)	N/A	N/A	No	N/A	N/A

MULTI-UNIT RESIDENTIAL BUILDING – 2 TO 4 UNITS PER BUILDING

PURCHASER OF POLICY	BUILDING OCCUPANCY¹	CONDO UNIT INDICATOR¹	NEWLY MAPPED	RATE TABLE	POLICY FORM
UNIT OWNER	2-4	Yes	Yes	1-4 Family residential	Dwelling
ASSOCIATION (ASSOCIATION-OWNED SINGLE UNIT ONLY)	2-4	Yes	Yes	1-4 Family residential	Dwelling
ASSOCIATION (ENTIRE BUILDING)	N/A	N/A	No	N/A	N/A
OWNER OF NON- RESIDENTIAL CONTENTS	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non- residential contents-only	General Property

MULTI-UNIT RESIDENTIAL BUILDING – 5 OR MORE UNITS PER BUILDING

PURCHASER OF POLICY	BUILDING OCCUPANCY¹	CONDO UNIT INDICATOR¹	NEWLY MAPPED	RATE TABLE	POLICY FORM
UNIT OWNER	Other residential	Yes	Yes	Other residential	Dwelling
ASSOCIATION (ASSOCIATION-OWNED SINGLE UNIT ONLY)	Other residential	Yes	Yes	Other residential	Dwelling
ASSOCIATION (ENTIRE BUILDING)	N/A	N/A	No	N/A	N/A
OWNER OF NON- RESIDENTIAL CONTENTS	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non- residential contents-only	General Property

NON-RESIDENTIAL BUSINESS, OTHER NON-RESIDENTIAL BUILDING

PURCHASER OF POLICY	BUILDING OCCUPANCY¹	CONDO UNIT INDICATOR¹	NEWLY MAPPED	RATE TABLE	POLICY FORM
OWNER OF NON- RESIDENTIAL CONTENTS	Non-residential business, Other Non-residential	Yes (Building coverage not available)	Yes	Non-residential business, Other Non- residential contents-only	General Property
OWNER OF RESIDENTIAL CONTENTS	Single family	Yes (Building coverage not available)	Yes	Residential contents-only	Dwelling
ASSOCIATION (ENTIRE BUILDING)	Non-residential business, Other Non-residential	N/A	Yes	Non-residential business, Other Non- residential building and contents	General Property

¹ When there is a mixture of residential and commercial usage within a single building, refer to the General Rules section of this manual.

**TABLE 4. COVERAGE LIMITS AND PREMIUMS FOR PROPERTIES
NEWLY MAPPED INTO AN SFHA ON OR AFTER OCTOBER 1, 2008^{1, 2, 3}**

OTHER RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS⁴
With Basement or Enclosure⁵

CONTENTS COVERAGE		\$8,000	\$12,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$80,000	\$100,000
BUILDING COVERAGE	\$ 20,000	\$213	\$231	\$246	\$262	\$277	\$290	\$303	\$316	\$328
	\$ 30,000	\$231	\$247	\$263	\$279	\$294	\$308	\$320	\$333	\$346
	\$ 50,000	\$272	\$289	\$305	\$320	\$335	\$349	\$363	\$374	\$387
	\$ 75,000	\$292	\$309	\$325	\$340	\$355	\$369	\$382	\$394	\$407
	\$100,000	\$318	\$335	\$351	\$367	\$382	\$395	\$409	\$421	\$433
	\$125,000	\$325	\$341	\$356	\$372	\$387	\$401	\$415	\$426	\$439
	\$150,000	\$331	\$347	\$363	\$379	\$393	\$407	\$420	\$432	\$444
	\$200,000	\$367	\$385	\$401	\$417	\$431	\$444	\$457	\$469	\$481
	\$250,000	\$388	\$404	\$421	\$438	\$451	\$464	\$478	\$490	\$502
	\$300,000	\$405	\$421	\$436	\$450	\$464	\$477	\$490	\$502	\$513
	\$350,000	\$421	\$438	\$451	\$466	\$479	\$492	\$505	\$516	\$527
	\$400,000	\$436	\$450	\$465	\$480	\$493	\$504	\$518	\$528	\$540
	\$450,000	\$449	\$464	\$478	\$493	\$504	\$517	\$531	\$541	\$551
\$500,000	\$462	\$476	\$490	\$504	\$516	\$527	\$541	\$551	\$562	

OTHER RESIDENTIAL BUILDING AND CONTENTS COVERAGE COMBINATIONS⁴
Without Basement or Enclosure⁶

CONTENTS COVERAGE		\$8,000	\$12,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$80,000	\$100,000
BUILDING COVERAGE	\$ 20,000	\$179	\$194	\$206	\$220	\$233	\$244	\$256	\$267	\$277
	\$ 30,000	\$201	\$214	\$227	\$241	\$254	\$265	\$277	\$288	\$297
	\$ 50,000	\$243	\$257	\$271	\$283	\$296	\$309	\$319	\$331	\$340
	\$ 75,000	\$269	\$281	\$295	\$308	\$319	\$332	\$343	\$354	\$364
	\$100,000	\$290	\$303	\$317	\$329	\$341	\$354	\$365	\$375	\$386
	\$125,000	\$298	\$312	\$326	\$336	\$349	\$361	\$371	\$382	\$392
	\$150,000	\$308	\$320	\$334	\$346	\$358	\$369	\$380	\$390	\$401
	\$200,000	\$341	\$354	\$367	\$380	\$392	\$403	\$415	\$424	\$434
	\$250,000	\$359	\$371	\$386	\$398	\$410	\$421	\$432	\$442	\$451
	\$300,000	\$387	\$397	\$410	\$420	\$431	\$442	\$450	\$459	\$470
	\$350,000	\$405	\$415	\$427	\$438	\$447	\$456	\$466	\$474	\$485
	\$400,000	\$423	\$431	\$443	\$451	\$461	\$471	\$480	\$488	\$499
	\$450,000	\$439	\$446	\$456	\$465	\$474	\$484	\$493	\$501	\$511
\$500,000	\$451	\$458	\$470	\$478	\$486	\$496	\$504	\$512	\$523	

- 1 Add either a \$25.00 or a \$250.00 surcharge to the premium in accordance with the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA). The HFIAA surcharge is \$25.00 for policies covering primary residences, including contents-only policies, if the named insured's primary residence is a single-family dwelling, an individual condominium unit, an apartment unit, or a unit in a cooperative building. For all other policies, the HFIAA surcharge is \$250.00.
- 2 Add the \$50 Probation Surcharge, if applicable.
- 3 Premium includes a 15% Reserve Fund Assessment and \$45 Federal Policy Fee.
- 4 Premium includes ICC Premium of \$5 for residential building coverage up to \$230,000 and \$4 for coverage over \$230,000. Deduct this amount if the risk is a condominium unit.
- 5 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces with an attached garage without proper openings.
- 6 Use this section of the table for buildings with crawlspaces or subgrade crawlspaces, including those with an attached garage that have proper openings.

XII. COMPLETING PAGE 1 OF THE PREFERRED RISK POLICY AND NEWLY MAPPED APPLICATION FORM

The PRP and Newly Mapped Application form, or a similar form for WYO Companies, must be used to apply for a policy under the Newly Mapped procedure.

The following are instructions for completing Page 1 of the PRP and Newly Mapped Application form.

A. Application Type

<input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL <input type="checkbox"/> TRANSFER (NFIP ONLY) PRIOR POLICY #: _____

Check the appropriate box to indicate if the application is for a NEW policy, RENEWAL, or TRANSFER (Direct or WYO) of an existing policy. If the application is for a renewal or transfer, enter the prior 10-digit policy number.

Select NEW:

- If applying for a new policy.

Select RENEWAL:

- If renewing an existing policy by application.

Select TRANSFER (NFIP ONLY):

- If the agent/producer moves his or her book of business from one insurer to another, or when an insurer acquires another's book of business.
- If the agent/producer is transferring an individual policy within the NFIP (Direct or WYO). For additional guidance, refer to the Transfer of Business subsection in the General Rules section of this manual.

B. Billing

BILLING	FOR RENEWAL, BILL:	<input type="checkbox"/> INSURED	<input type="checkbox"/> LOSS PAYEE
	<input type="checkbox"/> FIRST MORTGAGEE	<input type="checkbox"/> OTHER (AS SPECIFIED IN THE "2ND MORTGAGEE/OTHER" BOX BELOW)	
	<input type="checkbox"/> SECOND MORTGAGEE		

Check the appropriate box to indicate who should receive the renewal bill.

C. Policy Period

POLICY PERIOD	POLICY PERIOD IS FROM ____/____/____ TO ____/____/____ 12:01 A.M. LOCAL TIME AT THE INSURED PROPERTY LOCATION.
	WAITING PERIOD:
	<input type="checkbox"/> STANDARD 30-DAY
	<input type="checkbox"/> REQUIRED FOR LOAN TRANSACTION – NO WAITING PERIOD
	<input type="checkbox"/> MAP REVISION (ZONE CHANGE FROM NON-SFHA TO SFHA) – 1 DAY
<input type="checkbox"/> TRANSFER (NFIP ONLY) – NO WAITING PERIOD	
INDICATE THE PROPERTY PURCHASE DATE: ____/____/____	

Enter the policy effective date and policy expiration date (month/day/year). Check the box for the applicable waiting period. The effective date of the

policy is determined by adding the appropriate waiting period, if applicable, to the date of application listed in the "Signature" section. The standard waiting period is 30 days. For additional guidance on exceptions to the standard waiting period, refer to the Effective Date subsection in the General Rules section of this manual.

Check YES if the property was purchased on or after 07/06/2012, and indicate the property purchase date. Otherwise, check NO.

Provide the property purchase date. Property purchase does not apply to inheritances, gifts, transfers of ownership without purchase, assignments to an estate or trust, or at the time of foreclosure.

D. Agent/Producer Information

AGENT/PRODUCER INFORMATION	NAME AND MAILING ADDRESS OF AGENT/PRODUCER:
	AGENCY NO.: _____ AGENT'S TAX ID: _____
	PHONE NO.: _____ FAX NO.: _____
	EMAIL ADDRESS: _____

Enter the agent/producer or agency name, mailing address, agency number, tax ID number, phone number, fax number, and email address.

E. Insured Information

INSURED INFORMATION	NAME AND MAILING ADDRESS OF INSURED:
	PHONE NO.: _____
	IS THE INSURED A SMALL BUSINESS? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IS THE INSURED A NON-PROFIT ENTITY? <input type="checkbox"/> YES <input type="checkbox"/> NO

Enter the name, mailing address, and telephone number of the insured.

Check YES if the insured is a small business with less than 100 employees; otherwise, check NO.

Check YES if the insured is a non-profit entity; otherwise, check NO.

J. Community

• Rating Map Information

COMMUNITY	RATING MAP INFORMATION
	NAME OF COUNTY/PARISH: _____
	COMMUNITY NO./PANEL NO. AND SUFFIX: _____ - _____
	FIRM ZONE: _____ MAP DATE: ____/____/____

Provide the zone and map information from the FIRM most recently indicating that the building was outside the SFHA. Submit the rating map documentation with the application.

Enter name of the county or parish where the property is located. (Not all communities that have been assigned NFIP community numbers are participating in the NFIP. Policies may not be written in non-participating communities.)

Enter the community identification number, map panel number, and revision suffix of the map that will be used for rating for the community where the building is located. When there is only 1 panel (i.e., a flat map), the community number will consist of only 6 digits.

NOTE: The postal address of the insured building may not reflect the community where the property is located. Therefore, do not rely on the postal address when determining community status and identification.

In addition, because of possible changes in the FIRM, do not rely on information from a prior policy as accurately reflecting the current FIRM information.

The current community number may also be obtained from a flood zone determination or by checking the *NFIP Community Status Book* online (<http://www.fema.gov/national-flood-insurance-program/national-flood-insurance-program-community-status-book>) or contacting the insurer or a local community official.

Enter the FIRM zone in the space provided.

Enter the effective date of the map used for rating in the space provided.

• Current Map Information

COMMUNITY	CURRENT MAP INFORMATION
	CURRENT COMMUNITY NO./PANEL NO. AND SUFFIX: _____ - _____
	CURRENT FIRM ZONE: _____ CURRENT RFE: _____
	MAP DATE: ____/____/____

Use the FIRM in effect and that is effective at the time of presentment of premium and completion of the application form. Submit the current map documentation with the application.

Enter the current map information and map date in the space provided.

• Newly Mapped Information

COMMUNITY	NEWLY MAPPED INFORMATION
	DATE THE BUILDING WAS NEWLY MAPPED INTO THE SFHA: ____/____/____

Provide the date of the revised FIRM that initially mapped the building into the SFHA. Submit the newly mapped documentation with application.

K. All Buildings

Complete all required information in this section.

1. Building Purpose

ALL BUILDINGS	1. BUILDING PURPOSE
	<input type="checkbox"/> 100% RESIDENTIAL
	<input type="checkbox"/> 100% NON-RESIDENTIAL
	<input type="checkbox"/> MIXED-USE – SPECIFY PERCENTAGE OF RESIDENTIAL USE: _____ %

• Indicate if the building's purpose is 100% Residential or 100% Non-Residential. If Mixed Use, specify percentage of residential use.

2. Building Occupancy

ALL BUILDINGS	2. BUILDING OCCUPANCY
	<input type="checkbox"/> SINGLE FAMILY
	<input type="checkbox"/> 2-4 FAMILY
	<input type="checkbox"/> OTHER RESIDENTIAL
	<input type="checkbox"/> NON-RESIDENTIAL BUSINESS
	<input type="checkbox"/> OTHER NON-RESIDENTIAL

Check the type of occupancy for the building (i.e., Single Family, 2–4 Family, Other Residential, Non-Residential Business or Other Non-Residential).

• **Single Family** – This is either:

- A residential single-family building in which the total floor area devoted to non-residential uses is less than 50% of the building's total floor area, or
- A single-family residential unit within a 2–4 family building, other-residential building, business, or non-residential building, in which commercial uses within the unit are limited to less than 50% of the unit's total floor area.

This includes a residential townhouse/rowhouse, which is a multi-floor unit divided from similar units by solid, vertical, load-bearing walls, having no openings in the walls between units and with no horizontal divisions between any of the units.

NOTE: Commercial uses within the unit are offices, private schools, studios, or small service operations within a residential building.

• **2–4 Family** – This is a residential building, including an apartment building, containing 2–4 residential spaces and in which commercial uses are limited to less than 25% of the building's total floor area. This category includes apartment buildings and

7. Additions and Extensions (if Applicable)

ALL BUILDINGS	7. ADDITIONS AND EXTENSIONS (IF APPLICABLE) DOES THE BUILDING HAVE ANY ADDITIONS OR EXTENSIONS? <input type="checkbox"/> YES <input type="checkbox"/> NO (ADDITIONS AND EXTENSIONS MAY BE SEPARATELY INSURED.)
	COVERAGE IS FOR: <input type="checkbox"/> BUILDING INCLUDING ADDITION(S) AND EXTENSION(S) <input type="checkbox"/> BUILDING EXCLUDING ADDITION(S) AND EXTENSION(S) PROVIDE POLICY NUMBER FOR ADDITION OR EXTENSION:
	<input type="checkbox"/> ADDITION OR EXTENSION ONLY (INCLUDE DESCRIPTION IN THE PROPERTY LOCATION BOX ABOVE). PROVIDE POLICY NUMBER FOR BUILDING EXCLUDING ADDITION(S) OR EXTENSION(S):

Check YES if the building has additions or extensions attached to and in contact with the building by means of a rigid exterior wall, a solid load-bearing interior wall, a stairway, an elevated walkway, or a roof. Check NO if the building has no additions or extensions. For additional guidance, refer to the Additions or Extensions subsection in the General Rules section of this manual.

Check the appropriate box to indicate the desired coverage if the building has additions or extensions.

NOTE: Coverage automatically extends to additions and extensions, unless a separate policy is purchased for the addition(s) or extension(s). When insuring a building with additions and extensions under a single policy, the zone and elevation of the lowest floor of any additions and extensions cannot be excluded from the policy rating.

For additional guidance on additions and extensions, refer to the Single Building subsection of the General Rules section of this manual.

Check "Building including addition(s) and extension(s)" if the coverage intended by this application is for both a main building and any additions or extensions on one policy. If this section is left blank, coverage is presumed to include any additions and extensions discovered at the time of loss.

Check "Building excluding addition(s) and extension(s)" if the coverage intended by this application is for a main building only, because the addition(s) and extensions(s) will be insured by another policy. Provide the policy (or quote or application) number for the policy covering the addition or extension. Additions and extensions cannot be excluded from coverage on the building except by insuring them separately.

Check "Addition or extension only (include description in the Property Location box above)" if the coverage intended by this application is for an addition or extension only. A separate Elevation Certificate may be required to obtain the necessary information for rating.

Provide the policy (or quote or application) number for the policy covering the main building.

8. Insured's Primary Residence, Rental Property, Tenant's Coverage

ALL BUILDINGS	8. PRIMARY RESIDENCE, RENTAL PROPERTY, TENANT'S COVERAGE
	IS BUILDING INSURED'S PRIMARY RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IS BUILDING A RENTAL PROPERTY? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IS THE INSURED A TENANT? <input type="checkbox"/> YES <input type="checkbox"/> NO
	IF YES, IS THE TENANT REQUESTING BUILDING COVERAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, SEE NOTICE IN SIGNATURE BLOCK ON PAGE 2.

• Insured's Primary Residence

A primary residence is a single family building, condominium unit, apartment unit, or unit within a cooperative building that will be lived in by the policyholder or the policyholder's spouse for more than 50% of the 365 calendar days following the current policy effective date or some lesser amount of time if the policyholder does not lease the residence to another party or use the residence as rental or income coverage property at any time during the policy term. A policyholder and the policyholder's spouse may not collectively have more than one primary residence. Policyholders with primary residences may include the following:

- Active-duty military personnel who are deployed for 50% or more of the policy year in compliance with military orders;
- Policyholders displaced from a primary residence and living in a temporary residence due to a federally declared disaster or a loss event on the primary residence claimed on any line of insurance for 50% or more of the policy year; or
- Policyholders who are absent from a primary residence for reasons such as routine business travel, hospitalizations, and/or vacation for 50% or more of the policy year.

Check YES if an applicant or an applicant's spouse is the primary resident; otherwise, check NO.

If YES, the application must include current documentation of primary residence status. Acceptable documentation is one of the following: Homestead Tax Credit Form for Primary Residence, driver's license, automobile registration, proof of insurance for a vehicle, voter's registration, or documents showing where children attend school.

If documentation of a primary residence is not available, the insurer must obtain a signed and dated statement from the applicant which specifies that the property is the insured's primary residence. For additional guidance, refer to the Primary Residence Determination subsection in the General Rules section of this manual.

F. Coverage and Premium

COVERAGE AND PREMIUM	ENTER SELECTED OPTION FOR COVERAGE LIMIT AND PREMIUM FROM THE TABLES IN FLOOD INSURANCE MANUAL	
	BUILDING AND CONTENTS COVERAGE COMBINATION	
	BUILDING COVERAGE	\$
	CONTENTS COVERAGE / CONTENTS ONLY	\$
	PREMIUM*	\$
	HFAIA SURCHARGE	\$
	PROBATION SURCHARGE (IF APPLICABLE)	\$
TOTAL AMOUNT DUE	\$	
*INCLUDES FEDERAL POLICY FEE, ICC PREMIUM, AND RESERVE FUND ASSESSMENT		
INDICATE THE RATE TABLE USED: _____		
RISK RATING METHOD: <input type="checkbox"/> 7 - PRP <input type="checkbox"/> R - NEWLY MAPPED		

Enter the coverage limits and premium amounts from the appropriate PRP premium tables in this section.

Add either a \$25.00 or a \$250.00 surcharge to the premium in accordance with the Homeowner Flood Insurance Affordability Act of 2014 (HFIAA). The HFIAA surcharge is \$25.00 for policies covering primary residences, including contents-only policies, if the named insured's primary residence is a single-family dwelling, an individual condominium unit, an apartment unit, or a unit in a cooperative building. For all other policies, the HFIAA surcharge is \$250.00. The HFIAA surcharge is not subject to agent commissions.

Add the \$50 Probation Surcharge, if applicable. If the risk is a condominium unit, deduct the ICC Premium of \$5 for residential building coverage up to \$230,000 and \$4 for coverage over \$230,000.

Select risk rating method "R" for the Newly-Mapped-rated policies.

G. Signature

SIGNATURE	<small>NOTING BUILDING COVERAGE BENEFITS - EXCEPT FOR A RESIDENTIAL CONDOMINIUM BUILDING - ARE NOT AVAILABLE IF OTHER NFIP BUILDING COVERAGE HAS BEEN PURCHASED BY THE APPLICANT OR ANY OTHER PARTY FOR THE SAME BUILDING.</small>	
	<small>THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE, I UNDERSTANDING THAT ANY FALSE STATEMENTS MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER APPLICABLE FEDERAL LAW. SEE REVERSE SIDE OF COPIES.</small>	
	SIGNATURE OF INSURANCE AGENT/PRODUCER _____	DATE (MM/DD/YYYY) _____
	SIGNATURE OF INSURED (PERSONAL) _____	DATE (MM/DD/YYYY) _____

The agent/producer must sign and date Page 2 of the PRP and Newly Mapped application form and is responsible for the completeness and accuracy of the information provided on it. The insured's signature is optional.

NOTE: The waiting period, if applicable, is added to the application date to determine the policy effective date entered in the Policy Period section of the application.

Electronic transactions are permitted if the business process includes authentication of signatures and dates of receipt of premium. WYO Companies are responsible for determining the business practices and transaction authentication methods they will use to ensure the security and integrity of such transactions.

XIV. MAILING INSTRUCTIONS

Upon completion of all sections of the application, attach all required certifications and other documents to the application, along with a check or money order made payable to the insurer for the Total Amount Due.

If paying by VISA, MasterCard, Discover, or American Express, submit a disclaimer form, signed by the insured, with the PRP and Newly Mapped application form.

Mail the original copy of the completed application and all required documentation as described above, with the Total Amount Due, to the insurer. Retain a copy of the application and supporting documents for the agency file, and provide copies of the application to the applicant and the mortgagee.

After receipt of the application and Total Amount Due, the insurer will validate and process the application and issue the policy. The policy contract and declarations page will be mailed to the insured. Copies of the declarations page will be provided to the agent/producer and any designated mortgagee(s).

XV. HANDLING OF INCOMPLETE OR INCORRECT APPLICATIONS

If an application is incomplete, and/or the information submitted is incorrect or inconsistent, a policy will not be issued. The application may be placed in a pending status until the agent/producer provides the complete or correct information.

For NFIP Direct Business, in the case of an incomplete PRP and Newly Mapped application form, the Servicing Agent will send the agent/producer a letter requesting the necessary information. Copies of this letter will be provided to the named insured and designated mortgagee(s). The agent/producer should provide the necessary information to the NFIP Servicing Agent.

If the premium received is not enough to purchase the kind and amount of coverage requested, the policy will be issued for only the kind and amount of coverage that can be purchased for the premium payment received.

THIS LAYOUT OF THE REVISED PRP AND NEWLY MAPPED APPLICATION, PAGE 2 OF 2, IS PROVIDED FOR YOUR REFERENCE.
THE FINAL FORM WILL BE RELEASED UPON O.M.B. APPROVAL.

**U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
National Flood Insurance Program**

**PREFERRED RISK POLICY AND
NEWLY MAPPED APPLICATION, PAGE 2 (OF 2)**

IMPORTANT—PLEASE PRINT OR TYPE; ENTER DATES AS MM/DD/YYYY.
ALL DATA PROVIDED BY THE INSURED OR OBTAINED FROM THE ELEVATION CERTIFICATE SHOULD BE REVIEWED AND TRANSCRIBED BELOW. THIS PART OF THE APPLICATION MUST BE COMPLETED FOR ALL BUILDINGS.

NEW RENEWAL TRANSFER (NFP ONLY)
PRIOR POLICY #: _____

ELEVATED BUILDINGS

ELEVATED BUILDINGS (INCLUDING MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS)

1. IF THE BUILDING IS ELEVATED, IS THE AREA BELOW

FREE OF OBSTRUCTION WITH OBSTRUCTION

2. ELEVATING FOUNDATION TYPE

- PIERS, POSTS, OR PILES
- REINFORCED MASONRY PIERS OR CONCRETE PIERS OR COLUMNS
- REINFORCED CONCRETE SHEAR WALLS
- WOOD SHEAR WALLS
- SOLID FOUNDATION WALLS

3. MACHINERY AND/OR EQUIPMENT

DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN MACHINERY AND/OR EQUIPMENT? YES NO

IF YES, SELECT THE VALUE BELOW:

- UP TO \$10,000
- \$10,001 TO \$20,000
- IF GREATER THAN \$20,000 - INDICATE THE AMOUNT: _____

DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN A WASHER, DRYER OR FOOD FREEZER? YES NO

IF YES, SELECT THE VALUE BELOW:

- UP TO \$5,000
- \$5,001 TO \$10,000
- IF GREATER THAN \$10,000 - INDICATE THE AMOUNT: _____

4. AREA BELOW THE ELEVATED FLOOR

IS THE AREA BELOW THE ELEVATED FLOOR ENCLOSED? YES NO

IF YES, CHECK ONE OF THE FOLLOWING:

FULLY PARTIALLY

IS THERE A GARAGE? (CHECK ONE)

- NO GARAGE
- BENEATH THE LIVING SPACE
- NEXT TO THE LIVING SPACE

DOES THE AREA BELOW THE ELEVATED FLOOR CONTAIN ELEVATORS?

YES NO

IF YES, HOW MANY? _____

IF THE ANSWER TO ANY OF THE QUESTIONS REGARDING THE AREA BELOW THE ELEVATED FLOOR IS YES, OR THERE IS A GARAGE, ANSWER ALL THE FOLLOWING.

INDICATE MATERIAL USED FOR ENCLOSURE:

- INSECT SCREENING
- LIGHT WOOD LATTICE
- SOLID WOOD FRAME WALLS (IF BREAKAWAY, SUBMIT CERTIFICATION DOCUMENTATION)
- SOLID WOOD FRAME WALLS (NON-BREAKAWAY)
- MASONRY WALLS (IF BREAKAWAY, SUBMIT CERTIFICATION DOCUMENTATION)
- MASONRY WALLS (NON-BREAKAWAY)
- OTHER (DESCRIBE): _____

IF ENCLOSED WITH A MATERIAL OTHER THAN INSECT SCREENING OR LIGHT WOOD LATTICE, PROVIDE THE SIZE OF ENCLOSED AREA:

_____ SQUARE FEET

IS THE ENCLOSED AREA/CRAWLSPACE USED FOR ANY PURPOSE OTHER THAN SOLELY FOR

PARKING OF VEHICLES, BUILDING ACCESS AND/OR STORAGE? YES NO

IF YES, DESCRIBE: _____

DOES THE ENCLOSED AREA HAVE MORE THAN 20 LINEAR FEET OF FINISHED INTERIOR WALL, PANELING, ETC.?

YES NO

5. FLOOD OPENINGS

IS THE ENCLOSED AREA/CRAWLSPACE CONSTRUCTED WITH OPENINGS (EXCLUDING DOORS) TO ALLOW THE PASSAGE OF FLOODWATERS THROUGH THE ENCLOSED AREA? YES NO

IF YES, INDICATE NUMBER OF PERMANENT FLOOD OPENINGS WITHIN 1 FOOT ABOVE ADJACENT GRADE: _____

TOTAL AREA OF ALL PERMANENT FLOOD OPENINGS: _____ SQUARE INCHES.

ARE FLOOD OPENINGS ENGINEERED?

YES NO

IF YES, SUBMIT CERTIFICATION.

MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS

NOTE: WHEELS MUST BE REMOVED FOR TRAVEL TRAILER TO BE INSURABLE.

1. MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER DATA

YEAR OF MANUFACTURE: _____

MAKE: _____

MODEL NUMBER: _____

SERIAL NUMBER: _____

DIMENSIONS: _____ FEET

ARE THERE ANY PERMANENT ADDITIONS AND/OR EXTENSIONS? YES NO

IF YES, THE DIMENSIONS ARE: _____ FEET

2. ANCHORING

THE MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER ANCHORING SYSTEM UTILIZES: (CHECK ALL THAT APPLY.)

- OVER-THE-TOP TIES GROUND ANCHORS
- FRAME TIES SLAB ANCHORS
- FRAME CONNECTORS
- OTHER (DESCRIBE): _____

3. INSTALLATION

THE MANUFACTURED (MOBILE) HOME/TRAVEL TRAILER WAS INSTALLED IN ACCORDANCE WITH: (CHECK ALL THAT APPLY.)

- MANUFACTURER'S SPECIFICATIONS
- LOCAL FLOODPLAIN MANAGEMENT STANDARDS
- STATE AND/OR LOCAL BUILDING STANDARDS

CONSTRUCTION INFORMATION

CHECK ONE OF THE FOLLOWING AND ENTER DATE FOR ORIGINAL CONSTRUCTION:

BUILDING PERMIT CONSTRUCTION _____/_____/_____

CHECK IF BUILDING HAS BEEN SUBSTANTIALLY IMPROVED AND ENTER DATE:

SUBSTANTIAL IMPROVEMENT _____/_____/_____

CHECK ONE OF THE FOLLOWING FOR MANUFACTURED (MOBILE) HOMES/TRAVEL TRAILERS:

- LOCATED OUTSIDE A MOBILE HOME PARK OR SUBDIVISION: DATE OF PERMANENT PLACEMENT _____/_____/_____
- LOCATED INSIDE A MOBILE HOME PARK OR SUBDIVISION: CONSTRUCTION DATE OF MOBILE HOME PARK OR SUBDIVISION FACILITIES _____/_____/_____

CONTENTS

CONTENTS LOCATED IN:*

- BASEMENT/ENCLOSURE BASEMENT/ENCLOSURE AND ABOVE
- LOWEST FLOOR ONLY ABOVE GROUND LEVEL
- LOWEST FLOOR ABOVE GROUND LEVEL AND HIGHER
- ABOVE GROUND LEVEL MORE THAN 1 FULL FLOOR
- IS PERSONAL PROPERTY HOUSEHOLD CONTENTS? YES NO

IF NO, DESCRIBE: _____

*IF SINGLE FAMILY, CONTENTS ARE RATED THROUGHOUT THE BUILDING.

BUILDING ELIGIBILITY

THE PREFERRED RISK POLICY (PRP) IS ONLY AVAILABLE IF ALL ANSWERS TO QUESTIONS A AND B ARE NO, EXCEPT FOR BUILDINGS ELIGIBLE UNDER THE NEWLY MAPPED PROCEDURE, FOR WHICH THE ANSWER TO QUESTION A MAY BE YES.

ANSWER THE FOLLOWING TO DETERMINE A BUILDING'S ELIGIBILITY FOR A PRP:

A) IS THE BUILDING LOCATED IN A SPECIAL FLOOD HAZARD AREA (SFHA)? YES NO

B) DO ANY OF THE FOLLOWING CONDITIONS, ARISING FROM 1 OR MORE OCCURRENCES IN ANY 10-YEAR PERIOD, EXIST?

- 2 LOSS PAYMENTS, EACH MORE THAN \$1,000 YES NO
- 3 OR MORE LOSS PAYMENTS, REGARDLESS OF AMOUNT YES NO
- 2 FEDERAL DISASTER RELIEF PAYMENTS, EACH MORE THAN \$1,000 YES NO
- 3 FEDERAL DISASTER RELIEF PAYMENTS, REGARDLESS OF AMOUNT YES NO
- 1 FLOOD INSURANCE CLAIM PAYMENT AND 1 FLOOD DISASTER RELIEF PAYMENT (INCLUDING LOANS AND GRANTS), EACH MORE THAN \$1,000 YES NO

COVERAGE AND PREMIUM

ENTER SELECTED OPTION FOR COVERAGE LIMIT AND PREMIUM FROM THE TABLES IN FLOOD INSURANCE MANUAL.

BUILDING AND CONTENTS COVERAGE COMBINATION

BUILDING COVERAGE	\$
CONTENTS COVERAGE / CONTENTS ONLY	\$
PREMIUM*	\$
HFLAA SURCHARGE	\$
PROBATION SURCHARGE (IF APPLICABLE)	\$
TOTAL AMOUNT DUE	\$

*INCLUDES FEDERAL POLICY FEE, ICC PREMIUM, AND RESERVE FUND ASSESSMENT

INDICATE THE RATE TABLE USED: _____

RISK RATING METHOD: 7 - PRP R - NEWLY MAPPED

SIGNATURE

SIGNATURE OF INSURANCE AGENT/PRODUCER _____

DATE (MM/DD/YYYY) _____

SIGNATURE OF INSURED (OPTIONAL) _____

DATE (MM/DD/YYYY) _____

PLEASE SUBMIT TOTAL AMOUNT DUE AND ALL REQUIRED CERTIFICATIONS WITH THE NFP COPY OF THIS APPLICATION.
IF PAYING BY CHECK OR MONEY ORDER, MAKE PAYABLE TO THE NATIONAL FLOOD INSURANCE PROGRAM.
IMPORTANT — COMPLETE PAGE 1 AND PAGE 2 BEFORE SENDING APPLICATION TO THE NFP. — **IMPORTANT**

N F I P C O P Y